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THE SECOND INTERNATIONAL CONFERENCE ON THE BIOLOGICAL STANDARDIZATION OF CERTAIN REMEDIES

It is obvious that the usefulness of any medicinal remedy depends in large measure upon accurate dosage and uniformity in composition. If the remedies can be obtained in chemically pure form it is a simple matter to set up official chemical and physical standards to insure uniformity in composition and, hence, a reasonable constancy of therapeutic action. However, there exist a number of important remedies which, for some reason or other, can not be obtained in chemically pure form. Some of the remedies belonging to this class are highly potent. An overdose may be followed by serious symptoms and even death, whereas an insufficient dose may not produce the desired therapeutic action. Insulin, pituitrin, digitalis, arsphenamine and its substitutes, ergot, thyroid, etc., may be mentioned in this connection. It is therefore very important that methods of standardization should be developed which will permit the sale of these remedies in such form as to insure (1) constancy of therapeutic potency, (2) freedom from toxic impurities, and (3) elimination of fraudulent preparations.

In the case of the above-mentioned remedies, chemical and physical tests have either completely failed or are only of limited value. It is for this reason that a great deal of work has been carried out during the last 20 years to develop biological methods of assay. This work was carried out in different laboratories in different countries without any sufficient attempt at coordination, and, what is even more important, without effective control of the methods proposed. The result was that some of these remedies were sold to physicians with the claim of having been biologically standardized, though examination of the various products on the market often revealed enormous differences in potency. To mention only one example, it was found that the potency of pituitrin from various commercial sources varied as much as 800 per cent. It is not surprising that, under these conditions, this powerful remedy was used by physicians with more or less reluctance.

In order to remedy this situation the Health Committee of the League of Nations called a conference in July, 1923, at Edinburgh, of some expert pharmacologists and physiologists. This conference critically reviewed the then existing methods and organized some

cooperative work which was effectively carried out in various countries under the leadership of Dr. H. H. Dale of the National Institute of Medical Research of England.

The Second International Conference was convened in August, 1925, at Geneva. This conference discussed the work accomplished during the two preceding years and arrived, by unanimous consent, at the conclusions which are given below. These resolutions were adopted by the International Conference for the Unification of Formulas for Heroic Remedies held in Brussels in September, 1925. It is anticipated that these resolutions will be used by the various national pharmacopœial revision committees for the purpose of insuring national and international uniformity in potency of these important remedies.

Pituitary Extract

"The Conference recommends:

"1. That the dry (acetone) extracted substance of the fresh posterior lobe of the pituitary gland, which was recommended by Professor Voegtlin to the Edinburgh Conference as suitable for adoption as a standard of activity for pituitary extracts, and which has since been adopted as the standard for this purpose in the United States Pharmacopœia, Edition X, be now definitely accepted as the International Standard.

"2. That, since the evidence before the Conference indicates that, by strict adhesion to the instructions for its preparation, as given in the United States Pharmacopœia, Edition X, a sample of this powder of standard strength can be prepared at any time and in any country, the authority responsible for biological standardization, in each country concerned, should prepare such quantities of the standard as are needed for distribution in its own country. That Professor Voegtlin be requested to furnish, on behalf of the Health Organisation of the League of Nations, a small sample of the standard, as originally prepared for examination by the Edinburgh Conference, to any authority which may need it for confirmation of its own national standard.

"3. That it be recommended to the authorities responsible in the different countries for the pharmacopœias that a dry preparation of the pituitary posterior lobe, prepared in exact accordance with the method indicated for preparing the standard powder, should be included in each pharmacopœia, to serve as the official raw material for the preparation of the official watery extract.

"4. That in order to ensure the stability of the liquid extract prepared from such a powder, the hydrogen-ion concentration should be adjusted to within the limits represented by pH 4 and pH 5. The extract should be sterilised and sealed in ampules of non-alkaline resistant glass.

"5. That the pharmacopœial dried preparation and the extracts prepared therefrom should be biologically assayed in comparison with the standard, the extracts from the standard powder, and from the pharmacopœial dried preparation, being prepared for biological comparison according to the method indicated in the United States Pharmacopœia, Edition X. For the purpose of the biological assay, the test on the isolated uterus of the virgin guinea-pig, as described in the United States Pharmacopœia, Edition X, is recommended, as giving the most accurately quantitative results, among the available methods. As additional methods, may be recognised the test for pressor activity on the anaesthetised dog or the decapitated cat, and the test for antidiuretic action on the unanaesthetised dog.

"6. That in making the assay by the action on the guinea-pig's uterus, it is recommended that a test for non-specific, stimulant activity on that organ should be applied. This can be done by treating the extract under examination with normal NaOH for one hour at the ordinary temperature (20° C.), neutralising to litmus paper, and re-testing. Not more than 5 per cent of the activity on the uterus should survive this treatment.

"7. That the strength of all pituitary extracts should be expressed in *units* of activity, *the activity corresponding to 0.5 milligramme of the standard powder being defined as one unit*, so that, for example, the official liquid extract of the United States Pharmacopœia, Edition X, would contain 10 international units of activity per cubic centimetre."

Insulin

"It is recommended:

"1. That the dry preparation of insulin hydrochloride, prepared by the Medical Research Council of Great Britain, at the request of the Edinburgh Conference, should be accepted as the international standard preparation of insulin. That 1 milligramme of this standard contains 8 units of insulin (or 1 unit = 0.125 milligramme), as provisionally defined by the Insulin Committee of the University of Toronto.

"2. That this standard preparation be kept, on behalf of the Health Organisation of the League of Nations, by the Medical Research Council, who will undertake to test the permanence of its potency from time to time.

"3. That samples of this preparation, weighing 0.100 gramme each, be sent to some responsible organisation in each country (such as an Insulin Committee or a Government institution) who will undertake further distribution to testing laboratories. In those countries in which no suitable organization for this purpose exists, samples of the standard will be distributed by the Medical Research Council after consultation with the Insulin Committee of the Univer-

sity of Toronto, or, in case this Committee be discontinued, with one appointed by the Health Committee of the League of Nations.

"4. That each testing laboratory should prepare a standard of its own, and should compare the potency of this with the sample of the international standard placed in its hands for this purpose. When the latter is exhausted, further comparisons with the international standard should, where possible, be undertaken by the responsible authority for the particular country.

"5. That either of the following methods be considered as suitable for the bio-assay of insulin:

"(A) METHODS DEPENDING ON THE EFFECT ON BLOOD-SUGAR

First method.—Varying quantities of insulin that are less than the convulsive dose are injected subcutaneously into rabbits of about two kilogrammes body-weight, from which food has been withheld for 18–24 hours, and the average of the blood-sugar percentages over a period of five hours after the injection is subtracted from the blood-sugar percentage immediately preceding the injection. The number of units of insulin present in each cubic centimetre of the preparation is then calculated by use of a formula. Each rabbit used in the assays is tested at suitable intervals with a standard preparation which is periodically compared with the international standard.

"*Second method.*—Alternatively, one-half of a series of rabbits receives, in each case, an injection of ½ unit of the standard preparation per kilogramme, and the other half receives, on the same day, the dose supposed to be equivalent of the sample under test. The percentage fall of the blood-sugar content over a period of five hours is determined as above. A few days later the determinations are repeated on the same series of rabbits in this way, that the rabbits previously receiving the standard preparation now receive that under test and *vice versa*.

"From the relation between the falls of blood-sugar content produced, on the one hand, by the standard preparation, and on the other hand by the sample under test, the true activity of the latter in units per cubic centimetre can be calculated.

"(*b*) METHOD DEPENDING ON THE INCIDENCE OF SYMPTOMS IN WHITE MICE

"The assay is carried out by comparison with a standard preparation injected simultaneously with the unknown sample on an equal number of mice from a common stock. The onset of convulsions or collapse is used as the end point of the reaction and a mouse dose is the quantity producing convulsions (or collapse) in half the number of mice injected. During the test the mice are kept in an incubator at a uniform temperature of not less than 30° C.

"6. That the Conference appoint a sub-committee, which shall submit recommendations with regard to the permissible content of organic solid matter per unit in preparations of insulin and with regard to tests for the stability of such preparations.

"7. That, in future, the term 'unit of insulin' or 'insulin unit' should only be used in the sense indicated above."

Digitalis

"The Conference recommends:

"1. That, as an international standard, a dry powdered preparation of the leaves of *Digitalis purpurea* shall be made by Professor Magnus, on behalf of the Health Organisation of the League of Nations, of the same strength (±10%) as the experimental standard powder, prepared in accordance with the decision of the First International Conference on Biological Standardisation (Edinburgh 1923), and forming the basis of the various reports presented to this Conference. This standard shall be prepared by the mixture of ten different powders, made from leaves properly dried at 55–60° C., shall be adjusted by biological assays, carried out by Professor Magnus (who will use the method of assay on cats), and shall be distributed for international use. The permanence of its activity shall be annually controlled by Professor Magnus. If it should deteriorate, or if the supply should be nearly exhausted, a new standard preparation shall be prepared by the same method, and of exactly equal activity.

"The preparation shall be distributed in sealed ampules of brown glass. These shall be placed at the disposal of the different countries, for the assay of their own national standard preparations.

"2. That, according to present knowledge, no particular method of extraction (infusion, cold alcohol, warm alcohol) can be recommended as the only correct one. It is necessary, however, for the purpose of assay, that the preparation to be tested and the standard preparation shall be extracted by the same method.

"3. As methods of biological assay, the following can at present be recommended as sufficiently accurate:

"(1) THE FROG METHOD, WITH A PERIOD OF OBSERVATION OF AT LEAST 4 HOURS

"A. *Preparation of an extract of digitalis leaves with absolute alcohol.*—One gramme of digitalis leaves, coarsely powdered (B. 20 = mesh of about 0.75 mm.) and dried to constant weight over sulphuric acid, is allowed to stand for 24 hours at room temperature with 25 c. c. of absolute alcohol, with occasional shaking in a closed spherical flask of about 100 c. c. content. The mixture is then boiled for 30 minutes with a reflux condenser, on a sandbath over the smallest

possible flame, and, while still hot, is filtered through a plain filter of about 9 cm. diameter. The residue is washed with absolute alcohol on the filter until filtrate becomes colourless. The combined filtrates are slowly evaporated in a thin-walled, tared watch-glass, on a boiling water bath to 5 c. c. (about 4.5 grammes), the drying of any portion being carefully avoided.

"The concentrated extract, while still hot, is transferred with the aid of distilled water to a graduated flask, and made up to 25 c. c. with distilled water. By this procedure one obtains an emulsiform, greenish solution in weak, watery alcohol. This must be used immediately for the test.

"B. *Assay of the extract, obtained as described under (a), on frogs, by determination of the minimal lethal dose by the so-called unlimited-time method.*—For the test only healthy male frogs must be used (grass frogs, *Rana temporaria* or *Rana pipiens*), kept under constant conditions and weighing up to 40 grammes each. The body weight of the frogs, kept for several hours in the laboratory in a moist glass case, is determined immediately before the injection to an accuracy of 0.5 gramme, after drying the skin and expressing the urine.

"The extract prepared as above described is injected into frogs, through the mouth, into the breast lymph-sac, with a syringe graduated in hundredths of a c. c. Larger quantities than 0.3 c. c., or with weakly active preparations 0.5 c. c., should not be injected into the breast lymph sac; if necessary, the injections are to be made, in such cases, also into one or both of the lymph-sacs of the thighs.

"The following signs of intoxication appear: Within ½ to 2 hours after the injection, restlessness, air-hunger, formation of froth, paralysis and, in the course of four hours, stoppage of the heart. The criterion for the determination is that the stoppage is either systolic or rapidly transformed into systole.

"The orientating tests are carried out as follows: Doses differing by 20 per cent per gramme of frog are injected, one or two frogs being used for each dose.

"The final determination can be made by the following procedure:

"The mean between the smallest active and the greatest inactive dose is the first approximation. By further more exact determination, with four to six frogs on each dose, the final value can be obtained with an accuracy of 10 per cent. The determination is completed when, of two doses differing by 10 per cent, the higher kills a majority of frogs injected, the lower a smaller number.

"The value is expressed as a percentage of the standard preparation, which is tested at the same time and in the same manner. Only such leaves shall be passed for issue as differ from the standard preparation by not more than 25 per cent.

"The assay of digitalis tinctures is made in the following manner:

"10 c. c. of the official tincture (=1 gramme of leaves) are concentrated on the water bath at temperatures not above 60° C. to 5 c. c. volume, washed into a measuring flask with distilled water, and made up to 25 c. c. The assay is made according to the same method as described above for digitalis leaves.

"(2) THE CAT METHOD, AS MODIFIED BY MAGNUS FROM THAT OF HATCHER

"For biological standardisation on the cat the ½ per cent infusion of the digitalis leaves is used, prepared according to the indications of the Dutch Pharmacopœia, and then made isotonic by the addition of NaCl; in preparing this infusion, the temperature of 90° C. is not to be exceeded, and the extraction is to be continued for 15 minutes after this temperature has been attained. Cats are used with a body weight between 1.7 and 2.7 kilogrammes. The cat is anaesthetised with ether, a tracheal canula is inserted and, with the help of artificial respiration, a moderate anaesthesia with ether is maintained. The infusion runs at a regular rate from a graduated burette, arranged as a Mariotte's bottle, through a wide canula into the femoral vein. The rate of infusion is so adjusted that the duration of the experiment amounts to about forty minutes; minimum 30 minutes, maximum 55 minutes. If, as a result of the first determination, it appears that the preparation is especially potent, the infusion is suitably diluted, and the first experiment is not included in the calculation.

"The dose is determined which is necessary to produce stoppage of the heart; this is recognised by inspection and palpation of the thorax, by the asphyxial convulsions, and often also by the interrupted flow of the fluid into the vein; it is further confirmed by opening the chest. If the animal is found to be ill (pneumonia) or pregnant, the result obtained with it is rejected.

"In this manner one determines the lethal dose of the 0.5 per cent infusion on n cats and continues the determination until the mean percentage deviation of the single results, from the mean value of the whole series, is smaller than $6.67\sqrt{n-1}$. The average of the volumes infused per kilogramme of animal gives the true 'assay value' of the preparation. The lethal dose of the digitalis powder, in milligrammes per kilogramme of cat, is obtained by multiplying this number by 5. The number of lethal cat-doses contained in 1 gramme of digitalis powder is obtained by dividing 200 by the assay value.

"For the assay of digitalis tinctures, these are diluted 20 times with physiological salt solution.

"An exact description of the method, and details of the method of calculation, has been published by Dr. C. de Lind van Wyngaarden (Dè betrouwbaarheid van physiologische ijkingen, uitgewerkt voor Digitalis, Proefschrift, Utrecht, 1925).

"4. Other digitalis preparations and strophanthus tinctures can be assayed by corresponding methods, using as a standard for strophanthus tinctures *G. strophanthin* (ouabaïn), as recommended by the first Conference on biological standardisation (Edinburgh 1923).

"5. That no definite conclusions can be based on the clinical reports presented to the Conference, concerning the activity of the three digitalis powders which were distributed for comparison. It is necessary that these important observations should be continued on a very large number of cases by different methods.

"6. That the methods of biological assay presented to the Conference, other than those above recommended for acceptance, should be the subject of further co-ordinated investigations."

Arsphenamine

"The Conference recommends:

"I. That the internationally recognised biological standardisation of remedies of the arsenobenzene group should be made with a series of standard preparations, one for each of the compounds in question.

"II. That the following are the remedies which at present should be the subject of internationally recognised standardisation:

"1. Dioxydiamino-arsenobenzene dihydrochloride (syn. salvarsan, arsphenamine, arsenobenzol, etc.); and

"2. its metallic derivatives (silver-salvarsan); and

"3. Its sodium salt (sodium salvarsan);

"4. Dioxydiamino-arsenobenzene sulphoxylate of sodium (syn. neosalvarsan, neoarsphenamine, novarsenobenzol, etc.);

"5. Neosilver-salvarsan;

"6. Sulpharsphenamine (syn. sulfarsenol).

"III. That Professor Kolle of the Georg-Speyer Haus, Frankfurt on M., be requested to accept the responsibility for preparing, maintaining and distributing the standard preparations (1) to (5) on behalf of the Health Organisation of the League of Nations, and that Professor Voegtlin, of the Hygienic Laboratory, Washington, be invited similarly to be responsible for the standard preparation of (6).

"IV. That every batch of the remedies in question, before issue for therapeutic use on human patients, should be tested on normal animals for toxicity and on animals infected with a suitable strain of pathogenic trypanosomes (*T. brucei, T. equiperdum*, etc.) for therapeutic potency.

"V. That samples from every batch should be tested for toxicity on at least 10 mice or 5 rats, or on both, material from several separate ampules of each batch being separately tested, and that only such preparations should be passed for issue as exhibit, under identical conditions of experiment, a toxicity not greater than that of the corresponding standard sample.

"VI. That samples of each batch should be tested for therapeutic potency on mice or rats infected with a suitable strain of pathogenic trypanosomes (*T. brucei*, *T. equiperdum*, etc.) in accordance with the following principles:

"1. A series of mice or rats is to be taken, having the same degree of infection with the trypanosome employed, as determined by some method of enumeration per unit volume of blood.

"2. That, on such a series of animals with a uniform degree of infection, each batch shall be tested for therapeutic action in several (e. g., 2–4) doses, with at least three animals on each dose, and the result shall be evaluated by comparison with the effects of the standard preparation, administered to animals of the same species, with the same degree of infection.

"VII. That it is further recommended that, before a batch of one of the remedies in question is certified for general issue, samples of it shall have been used on a series of human patients, under the supervision of a qualified expert."

Thyroid Gland

"The members of this Conference are of opinion:

"1. That a biological method for the standardisation of thyroid gland substance is not necessary for routine application, the determination of the iodine in natural combination, as thyroid active principle, being a sufficient indication of the specific therapeutic activity. Where a biological method is needed, as, for example, for the detection of preparations which have been artificially enriched with iodide, they recommend the adoption of the aceto-nitrile test recommended by Professors Reid Hunt and Straub, as described in the publications of Doctors Haffner and Komiyama and Professor Reid Hunt. As a standard of activity, they recommend the activity of a dried preparation of healthy thyroid gland with a natural iodine content of 0.2 per cent.

"2. That Professor Reid Hunt be invited to obtain and keep as an interntational standard on behalf of the Health Organization of the League of Nations a sufficient sample of dried thyroid gland substance corresponding to the above definition."

Ergot

"The members of the Conference are of opinion:

"That the question of the biological standardisation of ergot is not yet ripe for final decision, and that it is desirable to give further study to the biological methods which have already been described, and to investigate those which may be discovered in the future, and especially to compare the results obtained by such methods with those obtained by the chemical method, presented to the Conference by Professor Straub."

Anthelmintics

The following resolution was unanimously adopted:

"That the recommendation adopted at the Edinburgh Conference be reaffirmed, with the necessary alterations to include the use of fish in addition to earthworms in the test, the recommendation, in the form of a pharmacopœial direction, being modified to read as follows:

"'*Extractum filicis maris aethereum:* Earthworms of medium size, or small fish (*Carassius, Gobio, Scardinius*) 5–10 cm. in length, when placed in 100 c. c. of a 0.002 per cent watery solution of the extract, shall be killed, but shall survive in lower concentrations of the extract.

"'*Rhizoma filicis maris:* A 0.002 per cent watery solution of the official ethereal extract, prepared from the dried drug, shall be the minimal lethal concentration for earthworms, and also for small fish (*Carassius, Gobio, Scardinius*) 5–10 cm. in length.'"

"That the method of testing oil of chenopodium on earthworms put forward by Professor Knafft-Lenz may be provisionally adopted as probably furnishing a useful indication as to the relative anthelmintic activities of different samples of this oil, but that further investigation of the method is desirable and that, in particular, an effort should be made to compare the results obtained with the test on earthworms with the practical anthelmintic properties of a series of samples of the oil of chenopodium."

Vitamins

"1. That, in the opinion of this Conference, it is of great importance that the preparations used in therapeutics to supply vitamins to the patient should be standardised as accurately as possible, each for its content of its characteristic vitamin or vitamins.

"2. That the preparation for which such standardisation appears at present to be most important and most practicable is cod-liver oil, vitamin A (growth-promoting factor) being the constituent of this oil which can be most accurately assayed.

"3. That the general question of the accuracy and usefulness of methods for the standardisation of all vitamins could be more suitably considered by a special conference of experts, appointed for the purpose.

"4. That this Conference should limit its present activity to the initiation of a comparative test, designed to determine the accuracy and specificity of the colour-reaction for vitamin A, recently described by Drummond and Rosenheim.

"5. That, for the purpose of this investigation, the Conference invite Professor Poulsson, Professor Voegtlin, and Doctor Dale to act as a Sub-Committee."

CURRENT WORLD PREVALENCE OF DISEASE

REVIEW OF THE MONTHLY EPIDEMIOLOGICAL REPORT ISSUED JANUARY 15, 1926, BY THE HEALTH SECTION OF THE LEAGUE OF NATIONS' SECRETARIAT.[1]

A marked rise in the general mortality during the month of December in cities in England and Wales, in Paris, and in several other large cities in Europe was noted in the January Epidemiological Report published by the Health Section of the League of Nations' secretariat. The maximum mortality seems to have occurred in the middle of December, coincidently with an increase in deaths from both respiratory and heart diseases. In the German and Scandinavian cities, the seasonal increase in mortality reported in December did not exceed that for December, 1924. The weekly mortality in some of the principal European cities is given in the table below.

Weekly mortality (all causes) in certain European cities from November 15, to December 26, 1925, compared with the mortality in corresponding weeks in 1924

Week ended—	105 English cities		Glasgow		46 German cities		Warsaw		Paris[1]	
	1924	1925	1924	1925	1924	1925	1924	1925	1924	1925
Nov. 21	12.1	13.8	16.9	18.5	11.4	10.5	15.0	13.5	14.4	14.1
Nov. 28	11.8	14.8	16.2	21.7	11.7	11.4	15.5	14.3	15.3	15.3
Dec. 5	12.0	16.3	15.1	21.7	11.6	11.0	13.0	15.0	14.5	17.1
Dec. 12	12.1	17.9	15.2	22.4	11.4	12.4	12.6	15.1	17.6	19.9
Dec. 19	12.6	16.4	15.7	20.4	11.5	------	15.3	------	16.1	------
Dec. 26	11.8	13.7	17.0	18.7	11.4	------	------	------	------	------

[1] Paris reports are for 10-day periods, from Nov. 11 to Dec. 31.

The mortality both in the English cities and in Paris, though higher than at any time during the preceding winter, did not reach the level reported in January, 1924.

In the United States the average death rate for 68 large cities for December did not exceed that for December, 1924, but during January and February the weekly death rates rose very sharply. It appears likely that the peak was reached in the week ended February 20, in which the average mortality for the 68 cities was 16.4 per 1,000. Although this rate is higher than that for any week in 1924 or 1925, it is considerably lower than the mortality recorded in February,

[1] From the Statistical Office, U. S. Public Health Service.

1923, when the rate was over 18 per 1,000. A comparison of the weekly rates during January and February with those in the same period last year is given in the accompanying table for a few of the larger cities showing a marked increase in recent weeks.

Weekly mortality per 1,000 (all causes) in 68 cities in the United States and in certain selected cities in January and February, 1926, compared with 1925

Week ended—	68 cities		Baltimore		Cincinnati		Detroit		New Orleans		San Antonio		Washington, D. C.	
	1925	1926	1925	1926	1925	1926	1925	1926	1925	1926	1925	1926	1925	1926
Jan. 9	14.6	15.6	20.0	17.7	17.1	21.5	10.9	13.1	18.1	22.8	18.2	14.7	13.3	18.6
Jan. 16	14.2	14.9	18.0	20.2	17.6	18.9	10.6	13.9	22.8	22.8	22.1	15.8	13.9	20.3
Jan. 23	14.2	14.9	17.0	18.5	18.3	17.5	10.6	14.6	20.4	22.8	18.2	20.3	14.7	19.0
Jan. 30	14.2	14.5	17.2	21.7	16.8	15.4	10.4	11.9	20.3	26.8	15.0	18.2	16.0	15.2
Feb. 6	14.4	15.2	16.7	22.2	16.8	20.8	11.4	13.1	20.8	27.7	16.3	20.8	15.0	19.7
Feb. 13	14.2	14.8	17.5	24.7	16.7	19.2	11.7	13.6	26.0	36.5	14.5	22.4	15.7	17.4
Feb. 20	14.5	16.4	16.8	23.0	16.7	19.5	12.1	14.4	26.4	29.4	15.0	21.1	16.7	24.8
Feb. 27	13.9	16.0	16.1	19.7	14.1	15.3	12.1	15.5	22.1	24.8	15.8	22.4	16.4	23.6

Some cities in each section of the country have experienced an increase in mortality. While data relating to cause are not yet available for all of the eight weeks' period covered in the foregoing table, reports from States and other sources point definitely to increases in pneumonia mortality and a rather marked increase in cases of influenza, grippe, and severe colds. The data available for January show an excess of deaths from influenza and pneumonia in some cities.

Plague.—Only eight of the 39 Asiatic ports reporting to the Singapore Bureau reported plague during the eight weeks ended January 16. The cases reported by the eight ports are given below.

Plague cases reported by eight Asiatic ports to the Singapore Bureau, November 22, 1925, to January 16, 1926

Port	Week ended—							
	Nov. 28	Dec. 5	Dec. 12	Dec. 19	Dec. 26	Jan. 2	Jan. 9	Jan. 16
Karachi [1]	0	0	0	1	0	0	0	0
Bombay [1]	0	0	1	0	0	0	2	0
Colombo	1	0	0	1	0	0	0	1
Rangoon [1]	2	2	1	0	3	0	3	5
Singapore	2	1	0	0	1	0	2	1
Surabaya	0	0	0	0	1	0	0	2
Makassar	0	2	3	1	1	0	1	1
Bangkok	2	1	0	0	0	0	1	1

[1] Deaths only reported.

Deaths from plague reported in the whole of India during the four weeks ended November 14 numbered 3,259, less than half the number reported in the corresponding period of 1924. The Bombay Presidency and Mysore were the only Provinces showing a greater prevalence than during the preceding year, and these two Provinces reported more than half the total number of cases.

In Java the plague incidence seems to have reached its maximum about the end of September as compared with December in the preceding year.

Deaths from plague in Java, July 19 to November 11, 1925, compared with 1924, by four-week periods

Four-week period 1924	Total deaths	Four-week period 1925	Total deaths
July 15–Aug. 11	704	July 19–Aug. 15	795
Aug. 12–Sept. 8	844	Aug. 16–Sept. 12	1,331
Sept. 9–Oct. 6	1,187	Sept. 13–Oct. 10	1,403
Oct. 7–Nov. 3	1,369	Oct. 11–Nov. 7	1,174
Nov. 4–Dec. 1	1,984		

Very little plague was reported in the Mediterranean area during December. Reports included one case at Beirut on December 6 and one at Patras on December 10. In the whole of Egypt only one case of plague, in the Province of Fayoum, was reported during December. No case was reported at Port Said from November 8 to the end of the year and none at Suez after October 2.

In Kenya, 72 cases of plague were reported in November, and in Uganda 75 cases, in both instances approximately one-half the number of cases occurring in October. In Madagascar the plague incidence was increasing, there having been 177 cases reported in October, 232 in November, and 400 in December.

Cholera.—The only ports reporting cases of cholera during December and the first two weeks of January were Calcutta, Madras, Negapatam, Manila, and Bangkok. No case had been reported at Shanghai since the second week of November, and none in any Japanese port since the last week in November. In Bangkok, where the number of new cases declined after the week ended December 12, when 93 cases were reported, the number of cases averaged 28 per week in the three weeks ended January 16.

The cholera outbreak in Siam began in Bangkok early in October and spread to 8 of the 18 Provinces. It is the most extensive cholera outbreak in Siam since 1919.

Cholera cases and deaths reported in Siam, October to November, 1925

Week ended—	Krung Deb[1]		Other Provinces	
	Cases	Deaths	Cases	Deaths
Oct. 3	0	0	7	4
Oct. 10	[2]9	3	0	0
Oct. 17	27	11	0	0
Oct. 24	5	4	2	1
Oct. 31	19	12	0	0
Nov. 7	25	21	30	12
Nov. 14	27	21	110	62
Nov. 21	60	45	315	199
Nov. 28	81	44	491	326

[1] Includes Bangkok.
[2] 8 of these cases were imported.

Cholera was less prevalent in India down to the middle of November than during the autumn of 1924. It was entirely absent during nearly the whole year in the central Provinces and Bombay Presidency, where it was epidemic the year before. The southern districts of Madras Presidency are heavily infected and the incidence of the disease rose rather sharply in Bengal from the middle of October. The total number of deaths reported in India in the four weeks ended November 14 was 3,847 compared with 6,304 in the corresponding period of 1924.

A severe outbreak of cholera was reported in the French settlement of Pondicherry, in India, with 880 cases and 712 deaths in the month of December.

Typhus fever.—A small outbreak of typhus fever occurred in eastern Czechoslovakia in November and December. There were 8 cases reported in October, 86 in November, and 52 in December; 10 of the cases occurred in Slovakia and the remainder in Subcarpathian Ruthenia. Only one death was reported.

In Poland the incidence of typhus fever began to increase in November, and 88 cases were reported in the two weeks ended November 14, compared with 37 in the preceding two weeks.

Smallpox.—The incidence of smallpox in England increased very markedly during November and December, and during the first week of 1926 there were reported 255 cases, "the highest number of smallpox cases for any week during more than 20 years." The cases were confined to the north of England and the type has been the usual mild variety occurring in England for some years.

Smallpox cases reported in England, by fortnightly periods, November 1, 1925, to January 9, 1926

County	Fortnightly period ended—				
	Nov. 14	Nov. 28	Dec. 12	Dec. 26	Jan. 9
Northumberland	12	13	18	14	18
Durham	81	118	167	224	239
Yorkshire:					
N. Riding	7	0	0	1	0
E. Riding	4	5	8	17	9
W. Riding	1	7	10	18	121
Nottingham	16	17	25	25	17
Derby	8	13	31	58	54
Isle of Ely	0	0	0	1	0
Total	129	173	259	358	458

A few cases of smallpox were reported during November or December by Switzerland, France, Italy, Greece, and Russia; but most European countries were apparently either entirely free from the disease or reported only sporadic cases. No information for Spain was received.

A recrudescence of smallpox occurred in December in the African countries bordering on the Mediterranean Sea. There were 441 cases in Algeria and 169 in Tunisia in December as against 140 and 79, respectively, in the preceding month. In Egypt 174 cases were reported during the four weeks ended December 23, compared with 62 cases in the preceding four weeks

In India, the smallpox incidence was increasing during October and the first half of November and reached a level higher than was reported at the corresponding season in any of the preceding four years. The increase was most marked in the Punjab and the North-west Province, which were least affected by last spring's epidemic, and in Bengal and Bihar and Orissa.

The smallpox outbreak in Java and Madura declined rapidly, and only 353 cases were reported in the four weeks ended November 7 as against 917 in the preceding four weeks.

Enteric fever.—Fewer cases of enteric fever were reported during the last month of 1925 in all European countries than during the corresponding period of 1924. The report states:

> It is probable that final returns for Europe as a whole will show less than half as many enteric fever cases during the fourth quarter of 1925 as during the corresponding quarter of 1924. It is to be hoped that this low incidence foreshadows a return of the former downward trend of the incidence of this disease, which has been arrested for a couple of years.

Dysentery.—Dysentery, as well as enteric fever, was less prevalent in Europe during the last months of 1925 than during the corresponding period of 1924. Reports for the principal European countries affected were as follows: 206 cases in Hungary in October 1925, as against 1,220 during the corresponding month of 1924; 29 cases in Czechoslovakia in November, as against 246 in the previous year; 92 for the same month in the Kingdom of the Serbs, Croats and Slovenes, as against 197; 42 cases and 2 deaths in Poland during the four weeks ended December 12, 1925, as against 327 cases and 64 deaths during the corresponding period of 1924.

Scarlet fever and diphtheria.—The incidence of scarlet fever diminished markedly in November and December in practically all European countries. The incidence of diphtheria in December showed no definite increase, but the course of the disease has not been so regular as that of scarlet fever.

Measles.—"There has been a marked increase in the number of measles cases in nearly all countries in the northern temperate belt for which information on this disease is available," says the report.

Cases of measles reported in various countries in 1924 and 1925

Month	Norway (cities)		Denmark		France		Hungary		Bulgaria		Russia (total)		Algeria		Mexico (deaths)	
	1924	1925	1924	1925	1924	1925	1924	1925	1924	1925	1924	1925	1924	1925	1924	1925
January	255	581	5,959	557	712	2,063	1,977	4,696	813	1,688	.....	50,842	80	80	12	63
February	260	772	5,065	918	928	3,151	1,478	4,512	1,220	3,475	.....	64,422	158	87	40	165
March	290	708	4,527	1,185	1,518	4,430	1,849	5,869	1,134	5,786	.....	64,322	229	135	97	419
April	543	505	4,608	981	1,916	4,615	1,216	4,719	646	5,119	.....	72,374	86	177	189	956
May	757	362	5,361	894	2,096	4,862	3,025	5,390	728	4,974	.....	64,796	20	72	125	1,100
June	551	208	2,858	734	1,636	5,919	2,425	3,311	649	2,223	.....	52,415	22	43	150	1,143
July	326	121	1,908	512	1,149	4,005	1,321	1,387	236	774	.....	43,019	10	32	193	1,178
August	109	29	894	251	482	1,362	607	412	100	193	.....	25,772	7	23	148	550
September	250	26	489	460	258	591	634	418	20	253	.....	17,124	1	8	85	331
October	975	131	757	1,232	288	1,133	2,009	1,202	273	605	.....	[1]13,120	2	4	99	.....
November	1,204	164	627	2,046	716	1,489	4,140	1,668	749	2,616	37,510	.....	12	29	42	.....
December	649	114	741	3,081	1,139	1,731	4,165	.....	825	3,601	50,481	.....	51	192	37	.....

Four-week period ended—	Scotland (16 cities, deaths)		England (105 cities, deaths)		Switzerland		Italy		Poland		Iraq (deaths)		Egypt (deaths)		United States (27 States)	
	1924	1925	1924	1925	1924	1925	1924	1925	1924	1925	1924	1925	1924	1925	1924	1925
Jan. 24	194	70	299	259	351	371	6,322	6,808	1,164	1,418	126	2	62	54	46,926	7,481
Feb. 21	162	38	330	276	393	403	6,469	9,402	1,201	2,820	96	22	83	43	58,718	10,514
Mar. 21	156	43	604	436	329	373	6,976	11,582	1,024	3,541	92	2	75	70	65,121	15,184
Apr. 18	137	24	559	532	255	422	9,558	11,493	457	3,005	39	3	160	173	54,848	16,537
May 16	128	30	498	394	186	491	8,697	13,018	356	3,676	40	2	239	421	41,484	20,202
June 13	66	19	316	304	196	594	6,846	13,019	1,205	4,377	59	31	312	654	29,296	21,093
July 11	25	13	192	214	269	437	5,397	8,393	870	3,335	134	9	331	1,092	14,427	10,448
Aug. 8	18	4	105	111	227	319	4,505	9,987	354	2,455	117	15	178	947	4,357	3,303
Sept. 5	19	3	58	91	129	188	2,072	4,758	157	1,197	33	11	51	824	1,357	1,394
Oct. 3	20	0	34	56	117	194	1,570	3,846	328	2,943	10	4	34	504	1,269	1,205
Oct. 31	21	9	67	95	145	275	2,061	4,059	553	6,493	10	29	81	442	2,121	3,128
Nov. 28	59	34	168	164	203	513	3,671	7,101	863	8,067	27	25	72	308	2,947	7,900
Dec. 26	85	55	264	279	403	1,015	5,095	6,381	1,549	.....	4	33	72	552	4,130	[illegible]

[1] Without the Ukraine, etc.

SILICOSIS: A RÉSUMÉ OF THE LITERATURE

As an aid to physicians in the State of New York in diagnosing cases of silicosis, Dr. Leland E. Cofer, director of the bureau of industrial hygiene of the New York State Department of Labor, has had prepared a special bulletin [2] in which is presented a résumé of the medical literature with special reference to diagnosis. As stated in the foreword, this pamphlet was issued in anticipation of legislation affording compensation to workers in industry suffering from silicosis and in view of the fact that unrecognized silicosis has undoubtedly caused deaths among industrial workers which have been attributed to other causes, such as fibroid phthisis, pulmonary tuberculosis, and bronchitis. The bulletin states:

> Careful studies which have been made of the mortality reports of different countries and cities throughout the world show that the death rate from tuberculosis of the lungs greatly varies. Silicosis is not a well-known disease and has not, therefore, been entered on the death certificate as a cause of death, but rather, the terms, phthisis pulmonalis, fibroid phthisis or tuberculosis of the lungs have been used. The term "phthisis" is unfortunate, unscientific and, as the statistics show, has been misleading. The sooner it is expunged from the vocabulary of the physician the better it will be, not only for the value of the records, but also the workers in dust and the reputation of tuberculosis.

The appendix contains quotations from the literature, the aim being to give in detail only those references which are likely to be of assistance to the general practitioner.

The bulletin is available free to all physicians who apply for it. Requests should be addressed to the Director, Bureau of Industrial Hygiene, New York State Department of Labor, 124 East Twenty-eighth Street, New York City.

CALIFORNIA STATE BOARD OF HEALTH TO VACCINATE ALL STATE EMPLOYEES

The Weekly Bulletin for February 27, 1926, issued by the California State Board of Health, in calling attention to the occurrence of the severe type of smallpox in that State, notes that all employees of the State board of health have been instructed to be vaccinated immediately. The board has also made provision for vaccinating all other State employees who desire to be vaccinated.

From January 2 to February 20, 1926, the Bulletin states that there were reported to the State board of health 964 cases of smallpox, with 86 known deaths, indicating that the present type of disease is not the mild variety which has been more or less prevalent in the West for several years.

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[2] Special bulletin: Silicosis—A Résumé of the Literature Arranged for the Use of the Physicians in the State of New York.

82792°—26†——2

ABSTRACT OF UNITED STATES SUPREME COURT DECISION RELATING TO BEDDING

Statutory provision prohibiting the use of shoddy in manufacture of bedding held violative of Federal Constitution.—(United States Supreme Court; Weaver *v.* The Palmer Bros. Co.; decided March 8, 1926.) One of the provisions of Act No. 314 of the Pennsylvania session laws of 1923, providing for the regulation of the manufacture, sterilization, and sale of bedding, prohibited the use of "shoddy," or any fabric or material from which "shoddy" is constructed, in the making, remaking, or renovating of any mattress, pillow, bolster, feather bed, comfortable, cushion, or article of upholstered furniture. In a suit brought by a Connecticut corporation which manufactured comfortables in that State and sold them there and in other States, the United States District Court for the Western District of Pennsylvania found that the statute infringed the corporation's constitutional rights in so far as it absolutely prohibited the use of shoddy in the manufacture of comfortables, and to that extent the court's decree restrained the enforcement of the statute. This decree was affirmed by the United States Supreme Court, and below are reproduced excerpts from that court's opinion:

Appellant claims that, in order properly to protect health, bedding material should be sterilized. The record shows that, for the sterilization of secondhand materials from which it makes shoddy, appellee uses effective steam sterilizers. There is no controversy between the parties as to whether shoddy may be rendered harmless by disinfection or sterilization. While it is sometimes made from filthy rags, and from other materials that have been exposed to infection, it stands undisputed that all dangers to health may be eliminated by appropriate treatment at low cost. In the course of its decision the District Court said, "It is conceded by all parties that shoddy may be rendered perfectly harmless by sterilization." The act itself impliedly determines that proper sterilization is practicable and effective. It permits the use of secondhand materials and new and secondhand feathers when sterilized, and it regulates processes for such sterilization.

There was no evidence that any sickness or disease was ever caused by the use of shoddy. And the record contains persuasive evidence and by citation discloses the opinions of scientists eminent in fields related to public health that the transmission of disease-producing bacteria is almost entirely by immediate contact with, or close proximity to, infected persons; that such bacteria perish rapidly when separated from human or animal organisms; and that there is no probability that such bacteria or vermin likely to carry them survive after the period usually required for the gathering of the materials, the production of shoddy, and the manufacture and the shipping of comfortables. This evidence tends strongly to show that in the absence of sterilization or disinfection there would be little, if any, danger to the health of the users of comfortables filled with shoddy, new or secondhand; and confirms the conclusion that all danger from the use of shoddy may be eliminated by sterilization. * * *

* * * Here, it is established that sterilization eliminates the dangers, if any, from the use of shoddy. As against that fact, the provision in question can not be sustained as a measure to protect health. And the fact that the act permits the use of numerous materials, prescribing sterilization if they are secondhand, also serves to show that the prohibition of the use of shoddy, new or old, even when sterilized, is unreasonable and arbitrary.

Nor can such prohibition be sustained as a measure to prevent deception. In order to ascertain whether the materials used and the finished articles conform to its requirements, the act expressly provides for inspection of the places where such articles are made, sold or kept for sale. Every article of bedding is required to bear a tag showing the materials used for filling and giving the names and addresses of makers and vendors, and bearing the word "secondhand" where there has been prior use, and giving the number of the permit for sterilizing and disinfecting where secondhand materials or feathers are used for filling. Obviously, these regulations or others that are adequate may be effectively applied to shoddy-filled articles.

The constitutional guaranties may not be made to yield to mere convenience. *Schlesinger* v. *Wisconsin*, decided March 1, 1926, — U. S.—. The business here involved is legitimate and useful; and, while it is subject to all reasonable regulation, the absolute prohibition of the use of shoddy in the manufacture of comfortables is purely arbitrary and violates the due process clause of the fourteenth amendment. Adams *v.* Tanner, 244 U. S. 590, 596; Meyer *v.* Nebraska, 262 U. S. 390; Burns Baking Co. *v.* Bryan, 264 U. S. 504.

DEATHS DURING WEEK ENDED MARCH 6, 1926

Summary of information received by telegraph from industrial insurance companies for week ended March 6, 1926, and corresponding week of 1925. (From the Weekly Health Index, March 9, 1926, issued by the Bureau of the Census, Department of Commerce)

	Week ended Mar. 6, 1926	Corresponding week 1925
Policies in force	63, 525, 389	58, 897, 864
Number of death claims	14, 676	12, 497
Death claims per 1,000 policies in force, annual rate	12. 0	11. 1

Deaths from all causes in certain large cities of the United States during the week ended March 6, 1926, infant mortality, annual death rate, and comparison with corresponding week of 1925. (From the Weekly Health Index, March 9, 1926, issued by the Bureau of the Census, Department of Commerce)

City	Week ended Mar. 6, 1926		Annual death rate per 1,000 corresponding week 1925	Deaths under 1 year		Infant mortality rate, week ended Mar. 6, 1926 [3]
	Total deaths	Death rate [1]		Week ended Mar. 6, 1926	Corresponding week, 1925	
Total (68 cities)	8,965	16.2	14.6	1,028	965	[4] 84
Akron	46			7	7	74
Albany [4]	51	22.6	17.7	2	4	42
Atlanta	80			6	5	
White	51			2		
Colored	29	(2)		4		
Baltimore [4]	258	16.9	16.9	23	24	67
White	194			17		61
Colored	64	(2)		6		97
Birmingham	110	27.9	16.5	16	8	
White	53			5		
Colored	57	(2)		11		
Boston	274	18.3	18.9	33	35	93
Bridgeport	43			5	6	85
Buffalo	149	14.4	16.0	16	29	67
Cambridge	38	16.6	18.7	4	9	66
Camden	66	26.8	15.4	6	8	101
Canton	16	7.9	11.3	7	4	156
Chicago [4]	803	14.0	14.2	86	115	76
Cincinnati	127	16.2	17.2	4	7	25
Cleveland	218	12.1	11.9	42	20	109
Columbus	94	17.5	15.3	14	11	129
Dallas	60	16.2	16.4	9	8	
White	40			3		
Colored	20	(2)		6		
Denver	93	17.3	14.1	9	10	
Des Moines	33	11.5	13.6	4	2	67
Detroit	365	15.3	13.5	70	62	113
Duluth	11	5.2	6.1	0	2	0
El Paso	36	17.9	16.9	9	3	
Erie	42			4	2	76
Fall River [4]	35	14.1	15.4	10	8	145
Flint	20	8.0	5.6	4	3	66
Fort Worth	35	12.0	9.6	4	4	
White	31			4		
Colored	4	(2)		0		
Grand Rapids	30	10.2	13.2	4	3	58
Houston	69	21.8	16.8	3	8	
White	50			3		
Colored	19	(2)		0		
Indianapolis	109	15.8	15.7	16	14	117
White	96			11		93
Colored	13	(2)		5		275
Jacksonville, Fla	45	22.4	19.9	4	6	83
White	21			0		0
Colored	24	(2)		4		229
Jersey City	95	15.7	14.1	11	8	78
Kansas City, Kans	29	13.0	21.1	3	9	52
White	19			1		21
Colored	10	(2)		2		263
Kansas City, Mo	99	14.0	17.7	18	16	
Los Angeles	264			16	26	44
Louisville	87	15.0	18.5	7	9	60
White	59			4		40
Colored	28	(2)		3		188
Lowell	26	12.3	18.0	5	10	93
Lynn	26	13.2	14.2	2	7	50
Memphis	79	23.6	21.2	13	8	
White	41			5		
Colored	38	(2)		8		
Milwaukee	116	12.1	14.4	14	19	65
Minneapolis	89	10.9	15.6	8	19	45
Nashville [4]	63	24.1	21.8	9	7	
White	41			4		
Colored	22	(2)		5		
New Bedford	24	10.5	14.0	10	6	174
New Haven	42	12.2	12.8	3	8	41
New Orleans	168	21.1	18.4	18	9	
White	107			12		
Colored	61	(2)		6		

Footnotes at end of table.

Deaths from all causes in certain large cities of the United States during the week ended March 6, 1926, infant mortality, annual death rate, and comparison with corresponding week of 1925—Continued

City	Week ended Mar. 6, 1926		Annual death rate per 1,000 corresponding week 1925	Deaths under 1 year		Infant mortality rate, week ended Mar. 6, 1926 [2]
	Total deaths	Death rate [1]		Week ended Mar. 6, 1926	Corresponding week, 1925	
New York	1,851	16.4	13.6	201	155	81
Bronx Borough	244	14.6	10.2	15	15	50
Brooklyn Borough	633	15.0	12.0	79	56	89
Manhattan Borough	768	20.6	17.9	87	72	96
Queens Borough	155	11.3	8.4	18	8	82
Richmond Borough	51	19.2	26.0	2	4	35
Newark, N. J	140	16.1	13.5	20	10	96
Norfolk	36			6	3	112
White	10			0		0
Colored	26	(3)		6		298
Oakland	50	10.3	9.0	8	7	93
Oklahoma City	24			1	3	
Omaha	52	12.8	13.5	6	8	63
Paterson	63	23.2	9.6	4	1	70
Philadelphia	870	22.9	13.1	94	55	125
Pittsburgh	217	17.9	13.8	33	14	110
Portland, Oreg	63	11.6	14.4	5	8	51
Providence	63	12.3	12.7	7	9	58
Richmond	73	20.4	18.2	5	6	63
White	43			1		20
Colored	30	(3)		4		140
Rochester	122	20.1	14.2	14	12	112
St. Louis	237	15.0	15.7	9	18	
St. Paul	65	13.8	14.6	3	8	27
Salt Lake City [4]	33	13.1	11.9	4	1	55
San Antonio	64	16.8	15.3	12	6	
San Diego	35	17.2	19.7	1	5	21
San Francisco	140	13.1	11.8	4	14	24
Schenectady	16	9.0	12.9	1	5	29
Seattle	74			12	6	111
Somerville	26	13.7	16.3	4	6	104
Springfield, Mass	35	12.8	15.0	6	6	87
Syracuse	67	19.2	15.8	9	6	114
Tacoma	37	18.5	14.0	11	4	257
Toledo	65	11.8	15.1	6	16	58
Trenton	57	22.5	17.4	3	9	50
Utica	34	17.4	15.4	5	1	110
Washington, D. C	194	20.3	18.7	10	23	57
White	115			5		41
Colored	79	(3)		5		91
Waterbury	34			10	5	215
Wilmington, Del	76	32.5	14.5	8	6	188
Worcester	63	17.2	17.8	7	0	81
Yonkers	29	13.3	8.7	5	0	112
Youngstown	40	13.0	13.4	3	4	38

[1] Annual rate per 1,000 population.
[2] Deaths under 1 year per 1,000 births. Cities left blank are not in the registration area for births.
[3] Data for 63 cities.
[4] Deaths for week ended Friday, Mar. 5, 1926.
[5] In the cities for which deaths are shown by color, the colored population in 1920 constituted the following percentages of the total population: Atlanta 31, Baltimore 15, Birmingham 39, Dallas 15, Fort Worth 14, Houston 25, Kansas City, Kans., 14, Louisville 17, Memphis 38, Nashville 30, New Orleans 26, Norfolk 38, Richmond 32, and Washington, D. C., 25.

PREVALENCE OF DISEASE

No health department, State or local, can effectively prevent or control disease without knowledge of when, where, and under what conditions cases are occurring

UNITED STATES

CURRENT WEEKLY STATE REPORTS

These reports are preliminary, and the figures are subject to change when later returns are received by the State health officers

Reports for Week Ended March 13, 1926

ALABAMA	Cases
Cerebrospinal meningitis	2
Chicken pox	84
Diphtheria	9
Influenza	1,922
Lethargic encephalitis	1
Malaria	6
Measles	98
Mumps	84
Ophthalmia neonatorum	2
Pellagra	2
Pneumonia	194
Poliomyelitis	1
Scarlet fever	23
Smallpox	32
Tuberculosis	33
Typhoid fever	7
Whooping cough	28

ARIZONA	
Chicken pox	40
Diphtheria	2
Influenza	38
Malta fever	1
Mumps	8
Pneumonia	2
Scarlet fever	20
Trachoma	1
Tuberculosis	30

ARKANSAS	
Chicken pox	17
Diphtheria	2
Influenza	284
Malaria	8
Measles	5
Mumps	15
Pellagra	2
Scarlet fever	6
Smallpox	3
Trachoma	7
Tuberculosis	3

CALIFORNIA	Cases
Cerebrospinal meningitis—Fresno	1
Chicken pox	421
Diphtheria	88
Influenza	63
Lethargic encephalitis—Sacramento	1
Measles	148
Mumps	440
Poliomyelitis:	
Long Beach	1
Palo Alto	1
Scarlet fever	135
Smallpox:	
Los Angeles	57
Oakland	29
Sonoma County	45
Scattering	38
Typhoid fever	3
Whooping cough	65

COLORADO	
Chicken pox	56
Conjunctivitis (epidemic)	3
Diphtheria	24
German measles	2
Influenza	6
Measles	35
Mumps	3
Pneumonia	10
Scarlet fever	33
Septic sore throat	6
Tuberculosis	46
Typhoid fever	29
Whooping cough	78

CONNECTICUT	
Cerebrospinal meningitis	1
Chicken pox	72
Conjunctivitis (infectious)	2
Diphtheria	48
German measles	9
Influenza	99

CONNECTICUT—continued	Cases
Measles	1,284
Mumps	31
Pneumonia (broncho)	102
Pneumonia (lobar)	91
Poliomyelitis	2
Scarlet fever	82
Septic sore throat	1
Tuberculosis (all forms)	59
Whooping cough	117

DELAWARE

Cerebrospinal meningitis	1
Chicken pox	2
Diphtheria	6
Influenza	34
Measles	106
Pneumonia	3
Scabies	1
Scarlet fever	8
Tuberculosis	3
Whooping cough	6

FLORIDA

Cerebrospinal meningitis	1
Chicken pox	33
Diphtheria	9
Influenza	64
Malaria	1
Measles	17
Mumps	26
Pneumonia	12
Scarlet fever	9
Smallpox	152
Tuberculosis	12
Typhoid fever	3
Whooping cough	11

GEORGIA

Cerebrospinal meningitis	1
Chicken pox	40
Conjunctivitis (acute)	1
Diphtheria	10
Dysentery	1
Hookworm disease	5
Influenza	1,332
Malaria	14
Measles	84
Mumps	61
Pellagra	4
Pneumonia	128
Scarlet fever	8
Septic sore throat	5
Smallpox	18
Tetanus	1
Tuberculosis	25
Typhoid fever	2
Whooping cough	38

IDAHO

Cerebrospinal meningitis:	
Coeur d'Alene	1
Post Falls	4
Chicken pox	11
Diphtheria	2
Influenza	8
Measles	2
Mumps	27
Rocky Mountain spotted fever—Boise	1
Scarlet fever	9
Smallpox	8
Whooping cough	13

ILLINOIS

Cerebrospinal meningitis:	
Cook County	1
De Kalb County	1
Logan County	1
Diphtheria	66
Influenza	521
Lethargic encephalitis:	
Cook county	1
Effingham County	1
Fayette County	1
Measles	1,091
Pneumonia	868
Poliomyelitis—Stark County	1
Scarlet fever	536
Smallpox	22
Tuberculosis	336
Typhoid fever	11
Whooping cough	223

INDIANA

Cerebrospinal meningitis	3
Chicken pox	91
Diphtheria	31
Influenza	374
Measles	1,535
Mumps	3
Pneumonia	33
Scarlet fever	226
Smallpox	86
Tuberculosis	68
Typhoid fever	2
Whooping cough	112

IOWA

Chicken pox	19
Diphtheria	15
German measles	54
Measles	102
Mumps	28
Pneumonia	3
Scarlet fever	43
Smallpox	30
Tuberculosis	11
Whooping cough	20

KANSAS

Chicken pox	74
Diphtheria	18
German measles	5
Influenza	58
Measles	267
Mumps	32
Pneumonia	49
Scarlet fever	80
Smallpox:	
Salina	12
Scattering	14
Tuberculosis	48
Typhoid fever	2
Vincent's angina	1
Whooping cough	112

LOUISIANA	Cases
Diphtheria	16
Influenza	537
Leprosy	1
Malaria	5
Pneumonia	40
Poliomyelitis	2
Scarlet fever	14
Smallpox	36
Tuberculosis	45
Typhoid fever	3
Whooping cough	19

MAINE	
Chicken pox	36
Diphtheria	5
German measles	20
Influenza	8
Measles	269
Mumps	50
Paratyphoid fever	1
Pneumonia	39
Scarlet fever	21
Tuberculosis	12
Typhoid fever	2
Vincent's angina	5
Whooping cough	49

MARYLAND [1]	
Cerebrospinal meningitis	2
Chicken pox	106
Diphtheria	23
Dysentery	1
German measles	1
Influenza	273
Lethargic encephalitis	1
Malaria	1
Measles	878
Mumps	78
Pneumonia (broncho)	90
Pneumonia (lobar)	85
Scarlet fever	41
Septic sore throat	1
Tuberculosis	67
Typhoid fever	2
Whooping cough	61

MASSACHUSETTS	
Cerebrospinal meningitis	1
Chicken pox	217
Conjunctivitis (suppurative)	8
Diphtheria	57
German measles	266
Hookworm disease	1
Influenza	65
Lethargic encephalitis	2
Malaria	1
Measles	1,283
Mumps	115
Ophthalmia neonatorum	24
Pneumonia (lobar)	161
Poliomyelitis	1
Scarlet fever	251
Septic sore throat	3
Tetanus	2
Trachoma	1

[1] Week ended Friday.

MASSACHUSETTS—continued	Cases
Tuberculosis (pulmonary)	116
Tuberculosis (other forms)	26
Typhoid fever	4
Whooping cough	527

MICHIGAN	
Diphtheria	82
Measles	2,043
Pneumonia	401
Scarlet fever	378
Smallpox	4
Tuberculosis	55
Typhoid fever	5
Whooping cough	275

MINNESOTA	
Cerebrospinal meningitis	1
Chicken pox	168
Diphtheria	53
Influenza	3
Measles	233
Pneumonia	2
Scarlet fever	457
Smallpox	7
Tuberculosis	46
Typhoid fever	5
Whooping cough	43

MISSISSIPPI	
Diphtheria	4
Influenza	1,233
Scarlet fever	7
Smallpox	16
Typhoid fever	3

MISSOURI	
Cerebrospinal meningitis	1
Chicken pox	99
Diphtheria	85
Influenza	42
Measles	547
Mumps	39
Ophthalmia neonatorum	1
Pneumonia	18
Poliomyelitis	1
Rabies (in animals)	7
Scarlet fever	298
Smallpox	6
Trachoma	4
Tuberculosis	31
Typhoid fever	1
Whooping cough	104

MONTANA	
Chicken pox	25
Diphtheria	5
German measles	19
Influenza	12
Measles	6
Mumps	47
Scarlet fever	43
Septic sore throat	1
Smallpox	7
Tuberculosis	4
Whooping cough	15

NEBRASKA	Cases
Cerebrospinal meningitis	1
Chicken pox	16
Diphtheria	4
Measles	36
Mumps	4
Pneumonia	3
Scarlet fever	52
Smallpox	22
Tuberculosis	5
Typhoid fever	1
Whooping cough	32

NEW JERSEY	
Anthrax	2
Cerebrospinal meningitis	3
Chicken pox	246
Diphtheria	57
Influenza	243
Measles	2,059
Pneumonia	384
Poliomyelitis	1
Scarlet fever	204
Trachoma	1
Typhoid fever	8
Whooping cough	106

NEW MEXICO	
Chicken pox	10
Conjunctivitis	10
Diphtheria	8
German measles	2
Influenza	24
Measles	1
Mumps	7
Pneumonia	25
Rabies (in animals)	1
Scarlet fever	7
Smallpox	5
Tuberculosis	24
Typhoid fever	1
Whooping cough	13

NEW YORK	
(Exclusive of New York City)	
Anthrax	1
Chicken pox	371
Diphtheria	77
German measles	233
Influenza	2,608
Lethargic encephalitis	4
Measles	1,241
Mumps	215
Ophthalmia neonatorum	1
Pneumonia	660
Poliomyelitis	1
Scarlet fever	265
Septic sore throat	5
Smallpox	4
Typhoid fever	14
Vincent's angina	8
Whooping cough	507

[1] Deaths.

NORTH CAROLINA	Cases
Cerebrospinal meningitis	1
Chicken pox	216
Diphtheria	22
German measles	222
Measles	259
Scarlet fever	27
Smallpox	37
Typhoid fever	1
Whooping cough	143

OKLAHOMA	
(Exclusive of Tulsa and Oklahoma City)	
Chicken pox	22
Diphtheria	15
Influenza	1,846
Malaria	33
Measles	38
Mumps	6
Pellagra	5
Pneumonia	184
Scarlet fever	36
Smallpox	15
Typhoid fever	2
Whooping cough	23

OREGON	
Cerebrospinal meningitis	2
Chicken pox	29
Diphtheria	25
Influenza	190
Measles	20
Mumps	19
Pneumonia	[1] 4
Scarlet fever	22
Smallpox	20
Tuberculosis	6
Typhoid fever	1
Whooping cough	49

PENNSYLVANIA	
Anthrax—Philadelphia	1
Cerebrospinal meningitis:	
Manheim Township [2]	1
Philadelphia	2
Pittsburgh	1
Plymouth	1
Chicken pox	550
Diphtheria	170
German measles	47
Impetigo contagiosa	11
Malaria	4
Measles	3,161
Mumps	256
Ophthalmia neonatorum—Philadelphia	1
Pneumonia	155
Scabies	16
Scarlet fever	529
Trachoma:	
McKees Rocks	1
Philadelphia	1
Tuberculosis	190
Typhoid fever	39
Whooping cough	433

[2] County not specified.

RHODE ISLAND	Cases
Chicken pox	5
Diphtheria	4
German measles	6
Influenza	55
Measles	269
Mumps	1
Pneumonia	8
Scarlet fever	7
Tuberculosis	5
Whooping cough	19

SOUTH DAKOTA	
Chicken pox	23
Diphtheria	3
Measles	27
Mumps	88
Pneumonia	6
Scarlet fever	50
Septic sore throat	1
Smallpox	4
Tuberculosis	1
Typhoid fever	2
Whooping cough	1

TENNESSEE	
Anthrax—Franklin County	1
Cerebrospinal meningitis—Gibson County	1
Chicken pox	42
Diphtheria	8
Dysentery	2
Influenza	646
Malaria	7
Measles	410
Mumps	20
Pellagra	5
Pneumonia	124
Scarlet fever	12
Smallpox	18
Tuberculosis	37
Typhoid fever	2
Whooping cough	9

TEXAS	
Chicken pox	48
Diphtheria	36
Influenza	1,162
Measles	5
Mumps	35
Pneumonia	69
Scarlet fever	17
Smallpox	43
Tuberculosis	41
Typhoid fever	1
Whooping cough	32

UTAH	
Cerebrospinal meningitis:	
Ogden	1
Salt Lake City	2
Chicken pox	56
Diphtheria	11
Influenza	10
Measles	1
Mumps	39
Pneumonia	3
Smallpox	1
Typhoid fever	1
Whooping cough	62

VERMONT	Cases
Chicken pox	17
Influenza	9
Measles	13
Mumps	23
Scarlet fever	16
Typhoid fever	1
Whooping cough	39

WASHINGTON	
Cerebrospinal meningitis:	
Seattle	5
Snohomish County	1
Spokane	2
Stevens County	1
Yakima County	1
Chicken pox	82
Diphtheria	15
German measles	24
Influenza	1
Measles	26
Mumps	99
Pneumonia	5
Scarlet fever	55
Smallpox:	
Tacoma	35
Yakima County	11
Scattering	48
Tuberculosis	69
Typhoid fever	2
Whooping cough	46

WEST VIRGINIA	
Diphtheria	7
Measles	138
Scarlet fever	14
Smallpox	4

WISCONSIN	
Milwaukee:	
Cerebrospinal meningitis	1
Chicken pox	117
Diphtheria	10
German measles	5
Influenza	1
Measles	87
Mumps	57
Ophthalmia neonatorum	1
Pneumonia	28
Scarlet fever	22
Tuberculosis	14
Typhoid fever	1
Whooping cough	44
Scattering:	
Chicken pox	110
Diphtheria	25
German measles	25
Influenza	114
Measles	402
Mumps	147
Pneumonia	25
Scarlet fever	121
Smallpox	12
Tuberculosis	20
Typhoid fever	6
Whooping cough	128

WYOMING	Cases
Chicken pox	8
German measles	2
Influenza	44
Measles	5
Mumps	8
Pneumonia	6
Scarlet fever	17
Typhoid fever	1
Whooping cough	11

Reports for Week Ended March 6, 1926

CONNECTICUT	Cases
Chicken pox	72
Conjunctivitis (infectious)	1
Diphtheria	53
German measles	17
Influenza	20
Lethargic encephalitis	1
Measles	1,037
Mumps	6
Pneumonia (broncho)	40
Pneumonia (lobar)	57
Scarlet fever	95
Tuberculosis (all forms)	31
Typhoid fever	4
Whooping cough	88

DISTRICT OF COLUMBIA	Cases
Chicken pox	31
Diphtheria	19
Influenza	8
Lethargic encephalitis	2
Measles	148
Pneumonia	119
Poliomyelitis	1
Scarlet fever	21
Tuberculosis	28
Whooping cough	22

IOWA	Cases
Cerebrospinal meningitis	4
Chicken pox	75
Diphtheria	14
German measles	62
Measles	89
Mumps	83
Pneumonia	19
Rabies	1
Scarlet fever	65
Smallpox	33
Tetanus	1
Tuberculosis	16
Whooping cough	14

NORTH DAKOTA	Cases
Chicken pox	29
Diphtheria	13
German measles	129
Influenza	27
Measles	30
Mumps	35
Pneumonia	33
Scarlet fever	89
Smallpox	10
Tuberculosis	8
Whooping cough	5

Report for Week Ended February 27, 1926

NORTH DAKOTA	Cases
Chicken pox	38
Diphtheria	6
German measles	108
Influenza	8
Measles	30
Mumps	37
Pneumonia	37
Poliomyelitis	7
Scarlet fever	132
Smallpox	3
Tuberculosis	2
Typhoid fever	3
Whooping cough	22

SUMMARY OF MONTHLY REPORTS FROM STATES

The following summary of monthly State reports is published weekly and covers only those States from which reports are received during the current week:

State	Cerebrospinal meningitis	Diphtheria	Influenza	Malaria	Measles	Pellagra	Poliomyelitis	Scarlet fever	Smallpox	Typhoid fever
January, 1926										
Arkansas	1	24	710	74	3	14	0	31	13	19
California	29	437	3,224	0	218	4	7	729	442	50
Colorado	1	106	8	.....	40	.....	1	143	1	8
Georgia	3	83	1,414	59	171	7	1	59	74	40
Virginia	9	228	3,809	39	933	6	1	396	92	22
February, 1926										
Arizona	0	20	229	.....	3	.....	0	45	3	2
Connecticut	1	183	54	.....	2,591	.....	1	331	0	11
Indiana	1	144	358	.....	4,953	.....	7	1,056	419	14
Vermont	0	7	.....	0	56	0	0	83	0	3
Wisconsin	10	236	177	0	1,280	0	2	712	44	16

LEPROSY ON VESSEL

On February 24, 1926, a case of leprosy was discovered at San Francisco quarantine station in a steerage passenger from Honolulu. The patient is being returned to the Hawaiian Islands.

PNEUMONIA (ALL FORMS) AND INFLUENZA

Deaths reported in large cities of the United States during three-week periods ended March 7, 1925, and March 6, 1926

PNEUMONIA (ALL FORMS)

	Week ended—					
	Feb. 21, 1925	Feb. 20, 1926	Feb. 28, 1925	Feb. 27, 1926	Mar. 7, 1925	Mar. 6, 1926
Atlanta	24	34	18	22	12	9
Baltimore	51	70	50	63	48	48
Birmingham	13	14	16	17	9	21
Boston	49	28	53	28	41	39
Bridgeport	2	8	5	7	6	5
Buffalo	16	22	22	18	17	
Cambridge, Mass	3	1	11	1	10	3
Camden	8	13	5	9	9	22
Canton	5	3	3		5	3
Chicago	97	107	96	94	117	127
Cincinnati	10	11		10	13	9
Cleveland	35	27	27	30	22	36
Columbus	8	7	9	4	12	7
Dallas	18	24	7	13	5	16
Denver	9	15	19	31	6	17
Detroit	43	69	42	68	45	77
Duluth	1	2	5	2	2	
Elizabeth	5		5		1	
El Paso	6	3	4	4	4	2
Erie	3	2	4	3	3	4
Fall River	6	3	5	1	6	4
Flint	1	5	6	5	3	2
Fort Worth	6	14	4	8	3	15
Grand Rapids	4	1	6	2	2	2
Hartford	9	7		5	13	5
Houston	13	25	10	15	5	27
Indianapolis	30	15	22	21	29	22
Kansas City, Mo	20	13	31		19	
Los Angeles	31	35	27	26	27	26
Louisville	12	9	16	7	13	17
Lowell	3		5		5	
Lynn	1	1	7		3	1
Memphis	19	21	8	19	13	10
Minneapolis	9	11	10	3	12	9
Nashville	5	10	3	6	5	6
New Bedford	3	2	9	5	10	4
New Haven	7	3	6	3	3	7
New Orleans	25	29	23	19	16	19
New York	227	348	195	356	233	361
Newark	16	18	19	19	17	
Norfolk	3	7	6	8	5	7
Oakland	5	3		6	4	7
Oklahoma City	2	4	3	2	3	7
Omaha	10	10	9	10	10	10
Philadelphia	93	125	58	166	79	210
Pittsburgh	50	38	46	35	38	40
Portland, Oreg	9	13	11	9	5	4
Providence	12	8	14	11	14	7
Reading			2	2	1	6
Richmond	5	30	14	17	6	10
Rochester	5	7	4	14	8	28
St. Paul	6	8	7	8	10	11
Salt Lake City	8		3	8	3	4
San Antonio	9	28	8	1	8	16
San Diego	7	3	6	5	9	2
San Francisco	13	9	5	10	3	5
Schenectady	3	1	4	5	5	2
Somerville	4	4	4	4	7	4
Springfield, Mass	3	1		0	2	1
Syracuse	7	4	12	6	9	5
Tacoma	4	1	3	2	1	
Toledo	4	5	13	3	8	5
Trenton	4	6	3	10	4	13
Washington	16	65	19	65	22	39
Waterbury	8	3	4	3	2	4
Wilmington, Del		9		18	2	23
Worcester	3	6	2	8	2	4
Youngstown	6	6	10	3	11	4

Deaths reported in large cities of the United States during three-week periods ended March 7, 1925, and March 6, 1926—Continued

INFLUENZA

	Week ended—					
	Feb. 21, 1925	Feb. 20, 1926	Feb. 28, 1925	Feb. 27, 1926	Mar. 7, 1925	Mar. 6, 1926
Atlanta		9	2	4	3	4
Baltimore	7	39	4	11	2	7
Birmingham	6	10	8	16	10	30
Boston	4		8	2	5	1
Bridgeport	1		2	1		
Buffalo		1	2		1	
Cambridge, Mass					1	
Camden		3	2	3		4
Canton			1			
Chicago	7	3	10	10	14	7
Cincinnati	2	5	2	2	2	5
Cleveland	4	3	2	1	7	
Columbus	2	1	3	1	1	3
Dallas	2	8	1	12	7	4
Denver	4	10	2	8	2	9
Detroit	4		6	4	6	3
Duluth						
Elizabeth	1		1			
El Paso	3	13	4	7	7	6
Erie		7		2	1	3
Fall River	1	1		1		
Flint						
Fort Worth	1	3	3	7	1	2
Grand Rapids	1	1	2		2	
Hartford						
Houston	1	4		7	2	1
Indianapolis	1	1	6	2	3	
Kansas City, Mo	9	5	16		15	
Los Angeles	1	15	3	8	4	6
Louisville			1			
Lowell						
Lynn						
Memphis	1	8	6	8	5	9
Minneapolis		1				
Nashville	4	8	3		1	7
New Bedford						
New Haven			1	2	1	1
New Orleans	20	40	20	20	16	14
New York	28	30	22	30	15	61
Newark		1		1		
Norfolk						
Oakland		3	2	1	1	
Oklahoma City	1	1		6	2	1
Omaha						
Philadelphia	9	14	9	35	9	54
Pittsburgh	4	4	3	6	4	2
Portland, Oreg		3		2		1
Providence						1
Reading						
Richmond	3	12	6	18	3	4
Rochester				1		8
St. Paul	1	1		4		1
Salt Lake City				2		
San Antonio	3	10	5	9	3	6
San Diego		2	1		1	1
San Francisco	2	11	1	2	2	3
Schenectady			1		1	
Somerville						
Springfield, Mass	1		4	2	1	2
Syracuse						1
Tacoma						
Toledo	1	2		1	3	3
Trenton		2	1	3	1	5
Washington	4	5	1	6	3	2
Waterbury	3	1				
Wilmington, Del						
Worcester						
Youngstown					3	

PLAGUE ERADICATIVE MEASURES IN THE UNITED STATES

The following items were taken from the report of plague eradicative measures from Los Angeles, Calif.

Week ended Feb. 27, 1926:

Number of rats trapped	1,912
Number of rats found to be plague infected	0
Number of squirrels examined	700
Number of squirrels found to be plague infected	0
Number of mice trapped	2,471
Number of mice found to be plague infected	0

Date of discovery of last plague-infected rodent, Nov. 6, 1925.
Date of last human case, Jan. 15, 1925.

GENERAL CURRENT SUMMARY AND WEEKLY REPORTS FROM CITIES

Diphtheria.—For the week ended February 27, 1926, 36 States reported 1,333 cases of diphtheria. For the week ended February 28, 1925, the same States reported 1,591 cases of this disease. Ninety-seven cities, situated in all parts of the country and having an aggregate population of more than 29,400,000, reported 761 cases of diphtheria for the week ended February 27, 1926. Last year for the corresponding week they reported 907 cases. The estimated expectancy for these cities was 981 cases. The estimated expectancy is based on the experience of the last nine years, excluding epidemics.

Measles.—Thirty-three States reported 17,810 cases of measles for the week ended February 27, 1926, and 3,447 cases of this disease for the week ended February 28, 1925. Ninety-seven cities reported 11,504 cases of measles for the week this year, and 1,940 cases last year.

Poliomyelitis.—The health officers of 37 States reported 23 cases of poliomyelitis for the week ended February 27, 1926. The same States reported 18 cases for the week ended February 28, 1925.

Scarlet fever.—Scarlet fever was reported for the week as follows: Thirty-six States—this year, 4,118 cases; last year, 5,068 cases; 97 cities—this year, 1,624 cases; last year, 2,080 cases; estimated expectancy, 1,198 cases.

Smallpox.—For the week ended February 27, 1926, 36 States reported 921 cases of smallpox. Last year for the corresponding week they reported 975 cases. Ninety-seven cities reported smallpox for the week as follows: 1926, 233 cases; 1925, 359 cases; estimated expectancy, 122 cases. Twelve deaths from smallpox were reported by these cities for the week this year—at Los Angeles, Calif.

Typhoid fever.—One hundred and forty-seven cases of typhoid fever were reported for the week ended February 27, 1926, by 35 States. For the corresponding week of 1925, the same States reported 228 cases of this disease. Ninety-seven cities reported 28

cases of typhoid fever for the week this year and 72 cases for the corresponding week last year. The estimated expectancy for these cities was 42 cases.

Influenza and pneumonia.—Deaths from influenza and pneumonia were reported for the week by 91 cities, with a population of more than 29,000,000, as follows: 1926, 1,712 deaths; 1925, 1,191.

City reports for week ended February 27, 1926

The "estimated expectancy" given for diphtheria, poliomyelitis, scarlet fever, smallpox, and typhoid fever is the result of an attempt to ascertain from previous occurrence how many cases of the disease under consideration may be expected to occur during a certain week in the absence of epidemics. It is based on reports to the Public Health Service during the past nine years. It is in most instances the median number of cases reported in the corresponding week of the preceding years. When the reports include several epidemics or when for other reasons the median is unsatisfactory, the epidemic periods are excluded and the estimate expectancy is the mean number of cases reported for the week during nonepidemic years.

If reports have not been received for the full nine years, data are used for as many years as possible, but no year earlier than 1917 is included. In obtaining the estimated expectancy, the figures are smoothed when necessary to avoid abrupt deviations from the usual trend. For some of the diseases given in the table the available data were not sufficient to make it practicable to compute the estimated expectancy.

Division, State, and city	Population July 1, 1925, estimated	Chicken pox, cases reported	Diphtheria		Influenza		Measles, cases reported	Mumps, cases reported	Pneumonia, deaths reported
			Cases, estimated expectancy	Cases reported	Cases reported	Deaths reported			
NEW ENGLAND									
Maine:									
Portland	75,333	7	2	0	1	0	3	5	3
New Hampshire:									
Concord	22,546	0	0	0	0	0	8	0	3
Manchester	83,097	0	4	1	0	0	8	0	1
Vermont:									
Barre	10,008	0	0	0	0	0	0	0	1
Burlington	24,089	0	0	0	0	0	0	0	0
Massachusetts:									
Boston	779,620	61	63	18	3	2	131	16	28
Fall River	128,903	2	5	5	1	1	16	3	1
Springfield	142,065	25	4	1	5	2	317	1	0
Worcester	190,757	7	4	0	0	0	25	7	8
Rhode Island:									
Pawtucket	69,760	0	1	1	0	0	52	0	0
Providence	267,918	0	12	4	2	0	322	0	11
Connecticut:									
Bridgeport	(1)	0	9	0	1	1	19	0	7
Hartford	160,197	8	0	2	0	0	0	0	5
New Haven	178,927	14	3	3	0	2	33	3	3
MIDDLE ATLANTIC									
New York:									
Buffalo	538,016	29	15	6	1	0	22	1	18
New York	5,873,356	213	217	137	205	30	2,811	42	356
Rochester	316,786	13	8	12	8	1	69	1	14
Syracuse	182,003	31	6	2	0	0	61	49	6
New Jersey:									
Camden	128,642	16	4	5	2	3	22	0	9
Newark	452,513	85	18	8	26	1	455	12	19
Trenton	132,020	7	4	1	3	3	5	1	10
Pennsylvania:									
Philadelphia	1,979,364	162	82	58	17	35	610	19	166
Pittsburgh	631,563	35	22	9	-------	6	41	5	35
Reading	112,707	9	3	0	0	0	3	0	2

[1] No estimate made.

City reports for week ended February 27, 1926—Continued

Division, State, and city	Population July 1, 1925, estimated	Chicken pox, cases reported	Diphtheria		Influenza		Measles, cases reported	Mumps, cases reported	Pneumonia, deaths reported
			Cases, estimated expectancy	Cases reported	Cases reported	Deaths reported			
EAST NORTH CENTRAL									
Ohio:									
Cincinnati	409,333	14	9	10	1	2	2	0	10
Cleveland	936,485	45	29	42	1	1	1,125	3	30
Columbus	279,836	10	4	0	0	1	286	0	4
Toledo	287,380	24	6	10	0	1	49	0	3
Indiana:									
Fort Wayne	97,846	12	3	1	0	0	2	0	3
Indianapolis	358,819	22	9	10	0	2	1,492	6	21
South Bend	80,091	7	1	3	0	0	1	0	0
Terre Haute	71,071	4	1	1	0	0	1	0	5
Illinois:									
Chicago	2,995,239	165	107	62	35	10	114	14	94
Peoria	81,564	5	2	0	0	0	23	12	8
Springfield	63,923	11	1	3	1	0	8	3	2
Michigan:									
Detroit	1,245,824	43	56	46	4	4	1,332	13	68
Flint	130,316	17	6	2	0	0	14	7	5
Grand Rapids	153,698	20	3	5	0	0	14	0	2
Wisconsin:									
Madison	46,385	0	0	2	0	0	100	1	0
Milwaukee	509,192	111	15	19	0	0	31	40	16
Racine	67,707	5	2	0	0	0	0	6	3
Superior	39,671	0	0	0	0	0	0	0	0
WEST NORTH CENTRAL									
Minnesota:									
Duluth	110,502	4	1	0	0	0	6	0	2
Minneapolis	425,435	64	17	17	0	0	113	4	3
St. Paul	246,001	36	15	21	0	4	2	13	8
Iowa:									
Davenport	(1)	5	1	1	0	-------	0	0	-------
Des Moines	(1)	0	3	2	0	-------	2	0	-------
Sioux City	(1)	0	2	0	0	-------	0	0	-------
Waterloo	36,771	13	1	1	0	-------	9	0	-------
Missouri:									
Kansas City	367,481	-------	8	-------	-------	-------	-------	-------	-------
St. Joseph	78,342	2	2	3	0	0	1	0	1
St. Louis	821,543	42	43	67	2	1	51	3	-------
North Dakota:									
Fargo	26,403	2	0	0	0	0	0	10	0
Grand Forks	14,811	5	0	0	0	-------	3	0	-------
South Dakota:									
Aberdeen	15,036	0	0	0	0	-------	0	73	-------
Sioux Falls	30,127	9	0	0	0	0	0	0	0
Nebraska:									
Lincoln	60,941	4	1	1	0	0	0	0	4
Omaha	211,768	27	5	2	0	0	12	-------	10
Kansas:									
Topeka	55,411	9	1	2	0	2	21	0	5
Wichita	88,367	5	3	1	0	2	60	2	4
SOUTH ATLANTIC									
Delaware:									
Wilmington	122,049	8	1	4	0	0	174	0	18
Maryland:									
Baltimore	796,296	78	27	9	171	11	1,037	182	63
Cumberland	33,741	0	0	0	2	0	2	0	1
Frederick	12,035	0	0	1	2	1	9	1	1
District of Columbia:									
Washington	497,906	44	13	9	58	6	122	0	65
Virginia:									
Lynchburg	30,395	16	1	0	0	0	19	4	7
Norfolk	(1)	29	1	0	0	0	2	6	8
Richmond	186,403	8	3	6	0	18	14	2	17
Roanoke	58,208	0	1	2	0	0	63	3	2
West Virginia:									
Charleston	49,019	10	1	0	6	0	5	0	2
Huntington	63,485	0	1	0	0	2	8	0	2
Wheeling	56,208	25	0	3	0	0	22	0	1
North Carolina:									
Raleigh	30,371	0	0	0	0	1	0	0	3
Wilmington	37,061	16	0	1	0	0	0	0	2
Winston-Salem	69,031	12	0	1	-------	3	276	1	4

[1] No estimate made.

City reports for week ended February 27, 1926—Continued

Division, State, and city	Population July 1, 1925, estimated	Chicken pox, cases reported	Diphtheria		Influenza		Measles, cases reported	Mumps, cases reported	Pneumonia, deaths reported
			Cases, estimated expectancy	Cases reported	Cases reported	Deaths reported			
SOUTH ATLANTIC—con.									
South Carolina:									
Charleston	73,125	0	0	0	8	5	0	0	2
Columbia	41,225	10	1	1	0	0	0	3	0
Greenville	27,311	1	0	0	0	0	1	0	2
Georgia:									
Atlanta	(1)	4	3	1	164	4	5	3	22
Brunswick	16,809	1	0	0	0	1	0	0	0
Savannah	93,134	5	0	1	13	1	4	1	6
Florida:									
St. Petersburg	26,847	----	0	----	----	0	----	----	0
Tampa	94,743	4	2	0	0	0	0	0	14
EAST SOUTH CENTRAL									
Kentucky:									
Covington	58,309	----	1	----	----	----	----	----	----
Louisville	305,935	12	5	1	7	0	52	0	7
Tennessee:									
Memphis	174,533	28	4	4	0	8	26	5	19
Nashville	136,220	12	1	1	0	0	144	0	6
Alabama:									
Birmingham	205,670	29	2	3	206	16	16	2	17
Mobile	65,955	0	1	0	8	2	0	0	7
Montgomery	46,481	5	1	1	14	0	0	10	0
WEST SOUTH CENTRAL									
Arkansas:									
Fort Smith	31,643	1	0	1	0	----	0	0	----
Little Rock	74,216	0	1	0	3	0	0	0	4
Louisiana:									
New Orleans	414,493	1	12	6	33	20	0	0	19
Shreveport	57,857	9	0	0	0	0	1	2	2
Oklahoma:									
Oklahoma City	(1)	0	1	1	0	6	0	0	2
Texas:									
Dallas	194,450	30	6	5	25	12	0	0	13
Galveston	48,375	0	0	1	0	0	0	0	3
Houston	164,954	1	2	13	5	7	0	0	15
San Antonio	198,069	1	2	1	----	9	1	0	24
MOUNTAIN									
Montana:									
Billings	17,971	1	0	0	0	0	0	4	0
Great Falls	29,883	11	0	0	0	0	0	10	1
Helena	12,037	0	0	0	0	0	0	0	1
Missoula	12,668	0	1	0	170	1	0	2	0
Idaho:									
Boise	23,042	3	0	1	0	0	0	0	0
Colorado:									
Denver	280,911	----	9	----	----	8	----	----	31
Pueblo	43,787	7	2	2	0	0	0	1	4
New Mexico:									
Albuquerque	21,000	0	1	0	3	2	3	3	0
Arizona:									
Phoenix	38,669	3	1	0	0	1	0	0	1
Utah:									
Salt Lake City	130,948	25	2	6	0	2	0	20	8
Nevada:									
Reno	12,665	0	0	0	0	0	0	0	0
PACIFIC									
Washington:									
Seattle	(1)	40	6	7	0	----	6	61	----
Spokane	108,897	12	3	3	0	----	0	0	----
Tacoma	104,455	0	1	6	0	0	3	1	2
Oregon:									
Portland	282,383	16	6	7	22	2	8	6	9
California:									
Los Angeles	(1)	114	32	47	47	8	10	10	26
Sacramento	72,260	3	1	3	0	0	0	3	2
San Francisco	557,530	55	24	14	6	2	41	15	10

[1] No estimate made.

City reports for week ended February 27, 1926—Continued

Division, State, and city	Scarlet fever		Smallpox			Tuberculosis, deaths reported	Typhoid fever			Whooping cough, cases reported	Deaths, all causes
	Cases, estimated expectancy	Cases reported	Cases, estimated expectancy	Cases reported	Deaths reported		Cases, estimated expectancy	Cases reported	Deaths reported		
NEW ENGLAND											
Maine:											
Portland	2	4	0	0	0	1	0	1	0	4	34
New Hampshire:											
Concord	0	0	0	0	0	1	0	0	0	0	19
Manchester	2	7	0	0	0	0	0	0	0	0	24
Vermont:											
Barre	1	0	0	0	0	0	0	0	0	0	4
Burlington	1	9	0	0	0	1	0	0	0	0	8
Massachusetts:											
Boston	60	82	0	0	0	13	2	1	0	178	222
Fall River	3	2	0	0	0	6	0	0	0	8	32
Springfield	8	10	0	0	0	2	1	0	0	18	33
Worcester	10	0	0	0	0	1	0	0	0	6	46
Rhode Island:											
Pawtucket	1	2	0	0	0	0	0	0	0	5	12
Providence	9	8	0	0	0	5	0	0	0	1	83
Connecticut:											
Bridgeport	9	20	0	0	0	1	0	0	0	6	37
Hartford	6	5	0	0	0	3	1	0	0	10	48
New Haven	7	17	0	0	0	3	1	0	0	14	40
MIDDLE ATLANTIC											
New York:											
Buffalo	19	17	1	0	0	14	1	0	1	18	150
New York	251	135	1	0	0	[1] 116	7	4	2	80	1,809
Rochester	16	15	0	0	0	2	1	1	0	10	87
Syracuse	16	4	0	0	0	1	0	0	0	78	44
New Jersey:											
Camden	4	7	0	0	0	2	0	0	0	5	57
Newark	24	33	0	0	0	8	0	0	0	5	139
Trenton	4	8	0	0	0	4	1	0	0	0	50
Pennsylvania:											
Philadelphia	73	91	1	0	0	52	3	0	0	33	789
Pittsburgh	27	55	0	0	0	13	0	0	0	32	178
Reading	2	10	0	0	0	0	0	0	0	4	24
EAST NORTH CENTRAL											
Ohio:											
Cincinnati	13	25	2	0	0	13	0	0	1	45	120
Cleveland	33	71	1	0	0	19	1	0	0	114	230
Columbus	9	24	1	3	0	2	0	0	0	1	71
Toledo	22	11	4	0	0	5	0	0	0	14	80
Indiana:											
Fort Wayne	4	5	0	0	0	2	0	0	0	3	38
Indianapolis	10	15	7	22	0	7	1	0	0	43	123
South Bend	3	5	1	1	0	0	0	0	0	11	9
Terre Haute	2	2	1	0	0	0	0	0	0	1	19
Illinois:											
Chicago	133	139	3	0	0	50	3	1	0	86	755
Peoria	4	7	0	1	0	0	0	0	0	4	37
Springfield	1	2	0	0	0	0	0	0	0	22	16
Michigan:											
Detroit	93	124	3	0	0	29	2	0	0	62	370
Flint	7	17	1	0	0	0	0	0	0	48	20
Grand Rapids	8	20	1	1	0	0	0	0	0	80	30
Wisconsin:											
Madison	4	11	0	0	0	0	0	0	0	4	6
Milwaukee	34	24	3	0	0	5	0	0	0	68	106
Racine	4	3	0	0	0	2	0	0	0	34	----
Superior	2	11	4	0	0	1	0	0	0	0	7

[1] Pulmonary tuberculosis only.

City reports for week ended February 27, 1926—Continued

Division, State, and city	Scarlet fever		Smallpox			Tuberculosis, deaths reported	Typhoid fever			Whooping cough, cases reported	Deaths, all causes
	Cases, estimated expectancy	Cases reported	Cases, estimated expectancy	Cases reported	Deaths reported		Cases, estimated expectancy	Cases reported	Deaths reported		
WEST NORTH CENTRAL											
Minnesota:											
Duluth	3	21	1	0	0	1	0	1	0	6	30
Minneapolis	42	62	13	0	0	2	1	0	0	8	75
St. Paul	28	52	6	0	0	0	0	0	0	25	63
Iowa:											
Davenport	2	1	2	0	----	----	0	0	----	0	----
Des Moines	8	1	2	0	----	----	0	0	----	0	----
Sioux City	2	2	1	3	----	----	0	0	----	0	----
Waterloo	3	0	0	2	----	----	0	0	----	1	----
Missouri:											
Kansas City	12	----	2	----	----	----	1	----	----	----	----
St. Joseph	3	8	0	0	0	4	0	0	0	1	22
St. Louis	32	156	4	4	0	11	1	0	0	9	240
North Dakota:											
Fargo	2	0	0	0	0	0	0	0	0	0	2
Grand Forks	0	0	0	0	----	----	0	0	----	0	----
South Dakota:											
Aberdeen	3	0	0	0	----	----	0	0	----	0	----
Sioux Falls	4	1	0	0	0	2	0	0	0	0	8
Nebraska:											
Lincoln	3	2	0	0	0	0	0	0	0	15	17
Omaha	5	27	6	30	0	8	0	0	0	5	68
Kansas:											
Topeka	2	1	0	0	0	0	0	0	0	3	28
Wichita	3	1	1	0	0	2	0	0	0	7	22
SOUTH ATLANTIC											
Delaware:											
Wilmington	3	6	0	0	0	1	0	0	0	10	71
Maryland:											
Baltimore	42	25	0	0	0	25	1	0	1	34	301
Cumberland	1	1	0	0	0	1	0	0	0	0	11
Frederick	1	1	0	0	0	0	0	0	0	0	5
Dist. of Columbia:											
Washington	26	32	1	0	0	11	0	1	1	30	225
Virginia:											
Lynchburg	0	0	0	0	0	2	0	2	0	5	17
Norfolk	1	1	0	0	0	0	0	0	0	21	----
Richmond	3	6	1	1	0	5	1	0	0	2	111
Roanoke	0	2	0	1	0	2	1	0	0	0	13
West Virginia:											
Charleston	1	1	1	0	0	1	1	1	0	23	20
Huntington	1	0	0	1	0	2	0	1	0	0	19
Wheeling	1	18	0	1	0	3	0	0	0	0	19
North Carolina:											
Raleigh	0	0	0	0	0	1	0	0	0	0	17
Wilmington	0	3	0	0	0	1	0	0	0	1	12
Winston-Salem	0	2	2	4	0	1	0	0	0	9	23
South Carolina:											
Charleston	0	0	0	0	0	1	0	0	0	0	21
Columbia	0	0	0	1	0	0	0	0	0	0	----
Greenville	0	0	0	0	0	2	0	0	0	3	7
Georgia:											
Atlanta	4	3	3	0	0	5	0	0	0	0	78
Brunswick	0	0	0	0	0	0	0	0	0	0	5
Savannah	1	3	0	0	0	2	0	1	0	2	34
Florida:											
St. Petersburg	0	----	0	----	0	2	0	----	0	----	23
Tampa	1	3	0	27	0	2	1	1	1	0	56

City reports for week ended February 27, 1926—Continued

Division, State, and city	Scarlet fever		Smallpox			Tuberculosis, deaths reported	Typhoid fever			Whooping cough, cases reported	Deaths, all causes
	Cases, estimated expectancy	Cases reported	Cases, estimated expectancy	Cases reported	Deaths reported		Cases, estimated expectancy	Cases reported	Deaths reported		
EAST SOUTH CENTRAL											
Kentucky:											
Covington	2	----	0	----	----	----	0	----	----	----	----
Louisville	5	4	1	0	0	6	1	0	0	7	84
Tennessee:											
Memphis	3	22	2	4	0	4	1	1	0	0	85
Nashville	4	1	1	0	0	5	0	1	1	3	48
Alabama:											
Birmingham	2	5	7	6	0	4	1	0	0	8	96
Mobile	0	0	1	0	0	2	1	0	0	0	36
Montgomery	0	1	1	0	0	0	0	0	0	0	19
WEST SOUTH CENTRAL											
Arkansas:											
Fort Smith	0	1	0	0	----	----	0	0	----	0	----
Little Rock	1	4	0	0	----	----	1	0	----	0	----
Louisiana:											
New Orleans	5	11	2	7	0	14	2	4	0	2	197
Shreveport	0	2	2	0	0	1	0	0	0	5	24
Oklahoma:											
Oklahoma City	3	3	4	0	0	0	0	1	0	0	28
Texas:											
Dallas	1	6	4	3	0	4	0	2	0	11	72
Galveston	0	1	0	15	0	0	0	1	1	0	11
Houston	1	0	2	6	0	5	0	0	0	1	72
San Antonio	1	1	0	0	0	10	0	0	0	0	85
MOUNTAIN											
Montana:											
Billings	1	0	0	0	0	0	0	1	0	1	5
Great Falls	2	4	3	0	0	0	0	0	0	2	12
Helena	0	0	0	0	0	0	0	0	0	0	3
Missoula	0	2	0	0	0	0	0	0	0	0	5
Idaho:											
Boise	1	0	1	4	0	0	0	0	0	0	5
Colorado:											
Denver	11	----	2	----	0	8	0	----	0	----	108
Pueblo	1	0	1	0	0	1	1	0	0	0	10
New Mexico:											
Albuquerque	1	5	0	0	0	3	0	0	0	1	7
Arizona:											
Phoenix	1	1	0	0	0	5	0	0	0	0	21
Utah:											
Salt Lake City	4	0	2	0	0	0	0	0	0	24	39
Nevada:											
Reno	0	0	0	0	0	0	0	0	0	0	2
PACIFIC											
Washington:											
Seattle	10	38	4	16	----	----	0	1	----	4	----
Spokane	3	25	6	0	----	----	0	0	----	0	----
Tacoma	2	2	3	10	0	1	1	1	0	2	24
Oregon:											
Portland	6	14	13	3	0	0	1	2	0	2	66
California:											
Los Angeles	19	27	3	62	12	22	2	1	1	3	290
Sacramento	1	1	1	2	0	2	0	0	0	0	27
San Francisco	15	23	6	1	0	16	0	0	0	3	164

City reports for week ended February 27, 1926—Continued

Division, State, and city	Cerebrospinal meningitis		Lethargic encephalitis		Pellagra		Poliomyelitis (infantile paralysis)		
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases, estimated expectancy	Cases	Deaths
NEW ENGLAND									
Massachusetts:									
Boston	0	0	1	2	0	0	0	0	0
Worcester	0	0	0	1	0	0	0	0	0
MIDDLE ATLANTIC									
New York:									
Buffalo	2	1	0	0	0	0	0	0	0
New York	4	3	6	5	0	0	1	1	1
New Jersey:									
Camden	0	0	1	1	0	0	0	0	0
Newark	0	0	1	0	0	0	0	0	0
Pennsylvania:									
Philadelphia	1	2	0	2	0	0	1	0	0
Pittsburgh	0	0	0	1	0	0	0	0	0
EAST NORTH CENTRAL									
Ohio:									
Cleveland	0	0	0	1	0	0	0	0	0
Illinois:									
Chicago	1	0	1	1	0	0	0	0	0
Michigan:									
Detroit	0	0	0	0	0	0	0	1	0
WEST NORTH CENTRAL									
Minnesota:									
Duluth	1	0	0	0	0	0	0	0	0
Minneapolis	1	0	0	0	0	0	0	0	0
Missouri:									
St. Joseph	0	0	0	0	0	0	0	1	0
St. Louis	1	1	0	0	0	0	0	0	0
SOUTH ATLANTIC									
Maryland:									
Baltimore	0	1	0	1	0	0	1	0	0
EAST SOUTH CENTRAL									
Tennessee:									
Memphis	0	0	0	0	0	1	0	0	0
Alabama:									
Birmingham	0	0	0	0	2	0	0	0	0
WEST SOUTH CENTRAL									
Louisiana:									
New Orleans	0	0	1	1	0	0	0	0	0
Texas:									
Dallas	0	0	0	0	1	1	0	0	0
Houston	0	0	0	0	1	1	0	0	0
MOUNTAIN									
Arizona:									
Phoenix	0	0	0	0	0	1	0	0	0
PACIFIC									
Washington:									
Seattle	2	0	0	0	0	0	0	0	0
Oregon:									
Portland	2	1	0	0	0	0	0	0	0
California:									
Los Angeles [1]	3	2	0	0	0	0	0	0	0
Sacramento	1	0	0	1	0	0	0	0	0

[1] Typhus fever, 1 case at Los Angeles, Calif.

The following table gives the rates per 100,000 population for 103 cities for the five-week period ended February 27, 1926, compared with those for a like period ended February 28, 1925. The popula-

tion figures used in computing the rates are approximate estimates as of July 1, 1925, and 1926, respectively, authoritative figures for many of the cities not being available. The 103 cities reporting cases had an estimated aggregate population of nearly 30,000,000 in 1925 and nearly 30,500,000 in 1926. The 96 cities reporting deaths had more than 29,250,000 estimated population in 1925 and more than 29,750,000 in 1926. The number of cities included in each group and the estimated aggregate populations are shown in a separate table below.

Summary of weekly reports from cities, January 24 to February 27, 1926—Annual rates per 100,000 population—Compared with rates for the corresponding period of 1925 [1]

DIPHTHERIA CASE RATES

	Week ended—									
	Jan. 31, 1925	Jan. 30, 1926	Feb. 7, 1925	Feb. 6, 1926	Feb. 14, 1925	Feb. 13, 1926	Feb. 21, 1925	Feb. 20, 1926	Feb. 28, 1925	Feb. 27, 1926
103 cities	[2] 160	142	[2] 169	134	[2] 163	[4] 136	153	[4] 137	[5] 163	[6] 134
New England	192	118	185	97	237	123	232	116	[5] 184	102
Middle Atlantic	155	130	170	129	164	140	162	132	177	118
East North Central	[3] 126	138	136	119	124	[4] 132	116	[4] 134	111	[4] 140
West North Central	243	245	247	220	251	168	203	202	289	[7] 263
South Atlantic	121	116	[3] 145	133	[3] 173	135	148	105	108	[8] 73
East South Central	89	42	58	42	63	47	74	57	47	[9] 55
West South Central	141	142	167	138	154	116	119	90	154	116
Mountain	129	264	185	127	92	173	157	218	148	[10] 163
Pacific	279	167	257	189	171	140	157	205	246	216

MEASLES CASE RATES

103 cities	[2] 204	1,383	[2] 242	1,481	[2] 285	[4] 1,717	367	[4] 1,985	[5] 342	[6] 2,024
New England	467	2,751	556	2,408	637	2,347	695	2,708	[5] 569	2,188
Middle Atlantic	205	1,185	204	1,347	286	1,511	371	1,913	341	2,040
East North Central	[3] 340	2,088	415	2,152	479	[4] 2,633	637	[4] 2,899	589	[4] 3,031
West North Central	20	277	16	408	28	542	26	677	70	[7] 642
South Atlantic	35	2,280	[3] 46	2,579	[3] 92	3,112	104	3,276	77	[8] 2,856
East South Central	84	394	47	711	68	732	47	960	42	[9] 1,311
West South Central	13	26	35	34	48	13	13	9	48	9
Mountain	277	100	758	91	148	109	601	137	888	[10] 0
Pacific	17	73	58	105	28	167	61	202	58	162

SCARLET FEVER CASE RATES

103 cities	[2] 346	287	[2] 397	298	[2] 385	[4] 298	376	[4] 309	[5] 390	[6] 287
New England	515	378	592	402	544	362	585	362	[5] 543	354
Middle Atlantic	299	235	372	209	406	197	374	208	411	187
East North Central	[3] 366	300	398	338	371	[4] 358	403	[4] 371	402	[4] 334
West North Central	756	661	844	746	695	770	719	772	711	[7] 764
South Atlantic	175	154	[3] 241	163	[3] 261	171	157	150	192	[8] 203
East South Central	200	100	89	119	194	114	205	244	168	[9] 182
West South Central	194	69	154	138	114	108	119	108	137	112
Mountain	250	255	324	155	370	218	240	237	305	[10] 109
Pacific	215	334	246	326	168	310	177	332	213	313

[1] The figures given in this table are rates per 100,000 population, annual basis, and not the number of cases reported. Populations used are estimated as of July 1, 1925, and 1926, respectively.
[2] Racine, Wis., not included.
[3] Wilmington, Del., not included.
[4] Madison, Wis., not included.
[5] Hartford, Conn., not included.
[6] Madison, Wis., Kansas City, Mo., Winston-Salem, N. C., Covington, Ky., and Denver, Colo., not included.
[7] Kansas City, Mo., not included.
[8] Winston-Salem, N. C., not included.
[9] Covington, Ky., not included.
[10] Denver, Colo., not included.

Summary of weekly reports from cities, January 24 to February 27, 1926—Annual rates per 100,000 population—Compared with rates for the corresponding period of 1925—Continued

SMALLPOX CASE RATES

	Week ended—									
	Jan. 31, 1925	Jan. 30, 1926	Feb. 7, 1925	Feb. 6, 1926	Feb. 14, 1925	Feb. 13, 1926	Feb. 21, 1925	Feb. 20, 1926	Feb. 28, 1925	Feb. 27, 1926
103 cities	[2] 65	40	[3] 73	47	[3] 76	[4] 53	64	[4] 41	[5] 64	[6] 41
New England	0	0	0	0	0	0	0	0	[5] 0	0
Middle Atlantic	9	1	2	0	4	1	2	0	3	0
East North Central	[2] 33	43	36	16	33	[4] 23	52	[4] 34	26	[4] 19
West North Central	189	53	141	53	187	32	123	63	117	[7] 90
South Atlantic	42	58	[3] 58	101	[3] 92	81	63	51	40	[8] 60
East South Central	599	21	756	42	620	52	488	104	536	[9] 55
West South Central	57	125	119	156	132	112	79	142	110	135
Mountain	46	18	28	73	157	73	83	36	55	[10] 73
Pacific	168	205	254	324	210	461	204	194	298	245

TYPHOID FEVER CASE RATES

103 cities	[2] 17	8	[3] 13	7	[3] 12	[4] 6	10	[4] 7	[5] 13	[6] 5
New England	7	9	29	14	19	5	0	7	[5] 13	5
Middle Atlantic	19	9	13	3	6	6	10	4	8	2
East North Central	[2] 10	4	8	3	6	[4] 4	6	[4] 5	6	[4] 1
West North Central	12	2	0	6	10	4	4	6	16	[7] 2
South Atlantic	35	9	[3] 16	13	[3] 20	15	8	4	19	[8] 12
East South Central	21	10	11	21	37	10	32	5	32	[9] 11
West South Central	57	17	22	4	44	0	40	22	40	30
Mountain	18	18	28	36	18	0	37	18	74	[10] 18
Pacific	3	11	17	16	11	13	22	16	8	8

INFLUENZA DEATH RATES

96 cities	[2] 22	29	[3] 29	35	[3] 27	[4] 34	29	[4] 50	[5] 34	[6] 46
New England	26	17	46	12	26	19	17	2	[5] 39	19
Middle Atlantic	16	18	24	20	22	15	21	27	20	39
East North Central	[2] 11	12	12	12	16	[4] 11	17	[4] 11	23	[4] 14
West North Central	15	13	19	19	11	4	21	19	36	[7] 22
South Atlantic	36	36	[3] 44	68	[3] 52	64	52	137	46	[8] 93
East South Central	68	73	63	104	58	62	68	161	116	[9] 143
West South Central	77	151	92	180	116	302	145	298	140	227
Mountain	37	73	55	109	55	127	55	109	18	100
Pacific	18	78	36	67	4	35	11	96	25	35

PNEUMONIA DEATH RATES

96 cities	[2] 198	193	[3] 214	206	[3] 212	[4] 213	207	[4] 260	[5] 190	[6] 200
New England	232	144	204	201	230	156	232	175	[5] 235	165
Middle Atlantic	229	217	252	213	230	212	215	289	184	316
East North Central	[2] 136	136	152	145	158	[4] 161	173	[4] 182	160	[4] 180
West North Central	114	108	106	127	133	77	127	125	150	[7] 81
South Atlantic	238	284	[3] 295	344	[3] 247	406	232	486	275	[8] 456
East South Central	278	208	299	249	289	223	294	296	268	[9] 309
West South Central	218	444	334	387	440	553	387	553	203	378
Mountain	305	164	185	228	268	328	203	173	259	410
Pacific	193	174	175	185	171	138	189	174	145	142

[2] Racine, Wis., not included.
[3] Wilmington, Del., not included.
[4] Madison, Wis., not included.
[5] Hartford, Conn., not included.
[6] Madison, Wis., Kansas City, Mo., Winston-Salem, N. C., Covington, Ky., and Denver, Colo., not included.
[7] Kansas City, Mo., not included.
[8] Winston-Salem, N. C., not included.
[9] Covington, Ky., not included.
[10] Denver, Colo., not included.

Number of cities included in summary of weekly reports, and aggregate population of cities in each group, approximated as of July 1, 1925 and 1926, respectively

Group of cities	Number of cities reporting cases	Number of cities reporting deaths	Aggregate population of cities reporting cases		Aggregate population of cities reporting deaths	
			1925	1926	1925	1926
Total	103	96	29,944,996	30,473,129	29,251,658	29,764,201
New England	12	12	2,176,124	2,206,124	2,176,124	2,206,124
Middle Atlantic	10	10	10,346,970	10,476,970	10,346,970	10,476,970
East North Central	16	16	7,481,656	7,655,436	7,481,656	7,655,436
West North Central	14	11	2,594,962	2,634,662	2,461,380	2,499,036
South Atlantic	21	21	2,716,070	2,776,070	2,716,070	2,776,070
East South Central	7	7	993,103	1,004,953	993,103	1,004,953
West South Central	8	6	1,184,057	1,212,057	1,078,198	1,103,695
Mountain	9	9	563,912	572,773	563,912	572,773
Pacific	6	4	1,888,142	1,934,084	1,434,245	1,469,144

FOREIGN AND INSULAR

SMALLPOX ON VESSEL

The Mexican steamer *Montezuma* discharged two members of the crew at Ensenada, Mexico, on February 21, 1926, suffering from smallpox. All other members of the crew were vaccinated, and the vessel proceeded to San Francisco, where the crew were under observation. No other cases developed.

THE FAR EAST

Report for week ended February 13, 1926.—The following report for the week ended February 13, 1926, was transmitted by the far eastern bureau of the health section of the League of Nations' secretariat, located at Singapore, to the headquarters at Geneva:

Port	Plague		Cholera		Smallpox	
	Cases	Deaths	Cases	Deaths	Cases	Deaths
Calcutta	----	0	----	27	----	45
Bombay	----	2	----	0	16	12
Madras	----	0	----	3	10	0
Rangoon	----	2	----	1	13	5
Karachi	----	0	----	0	9	3
Negapatam	----	0	----	11	5	5
Colombo	1	1	0	0	3	0
Basra	0	0	0	0	7	7
Singapore	0	0	0	0	1	0
Port Swettenham	0	0	0	0	0	0
Penang	0	0	0	0	0	0
Batavia	0	0	0	0	0	0
Surabaya	0	0	0	0	0	0
Samarang	0	0	0	0	0	0
Belawan Deli	0	0	0	0	0	0
Padang (Sumatra)	0	0	0	0	0	0
Sabang (Rhio)	0	0	0	0	0	0
Makassar	0	0	0	0	0	0
Pontianak (Borneo)	0	0	0	0	0	0
Sandakan (N. Borneo)	0	0	0	0	0	0
Kuching (Sarawak)	0	0	0	0	33	2
Timor Dilly	0	0	0	0	0	0
Manila	0	0	2	0	0	0
Zamboanga	0	0	0	0	0	0
Bangkok	5	4	19	13	14	5
Saigon and Cholon	0	0	0	0	1	0
Haiphong	0	0	0	0	0	0
Tourane	0	0	0	0	1	0
Hongkong	0	0	0	0	0	0
Shanghai	0	0	0	0	----	11
Nagasaki	0	0	0	0	0	0
Yokohama	0	0	0	0	0	0
Simonoseki	0	0	0	0	0	0
Moji	0	0	0	0	0	0
Kobe	0	0	0	0	0	0
Osaka	0	0	0	0	0	0
Niigata	0	0	0	0	0	0
Tsuruga	0	0	0	0	0	0
Hakodate	0	0	0	0	0	0
Keelung	0	0	0	0	0	0
Fusan	0	0	0	0	0	0
Dairen	0	0	0	0	3	2
Adelaide	0	0	0	0	0	0
Brisbane	0	0	0	0	0	0
Fremantle	0	0	0	0	0	0
Melbourne	0	0	0	0	0	0
Sydney	0	0	0	0	0	0
Rockhampton	0	0	0	0	0	0
Townsville	0	0	0	0	0	0
Port Darwin	0	0	0	0	0	0
Broome	0	0	0	0	0	0
Port Moresby	0	0	0	0	0	0
Auckland	0	0	0	0	0	0
Wellington	0	0	0	0	0	0
Christchurch	0	0	0	0	0	0
Invercargill	0	0	0	0	0	0
Honolulu	0	0	0	0	0	0
Suez	0	0	0	0	0	0
Alexandria	0	0	0	0	0	0
Port Said	0	0	0	0	0	0
Mombasa (Kenya)	0	0	0	0	0	0
Massowah	0	0	0	0	0	0
Djibuti	0	0	0	0	0	0
Berbera	0	0	0	0	0	0
Mozambique	0	0	0	0	0	0
Lourenco Marques	0	0	0	0	0	0
Durban	0	0	0	0	0	0
East London	0	0	0	0	0	0
Port Elizabeth	0	0	0	0	0	0
Cape Town	0	0	0	0	0	0
Port Louis (Mauritius)	0	0	0	0	0	0
Seychelles	0	0	0	0	0	0

ARGENTINA

Plague—Buenos Aires.—A case of plague was reported at Buenos Aires, Argentina, during the week ended January 30, 1926.

BAHAMAS

Smallpox—Stated to have been imported.—Under date of February 23, 1926, the occurrence of six cases of smallpox, stated to have been imported from Florida, was reported in the district of Nassau, Bahama Islands.

Other diseases present.—Some cases of dysentery, influenza, leprosy, and tertian malaria were reported, February 23, as present in the Bahama Islands.

CANADA

Communicable diseases—Week ended February 27, 1926.—The Canadian Ministry of Health reports certain communicable diseases in seven Provinces of Canada for the week ended February 27, 1926, as follows:

Disease	Nova Scotia	New Brunswick	Quebec	Ontario	Manitoba	Saskatchewan	Alberta	Total
Influenza	40							40
Lethargic encephalitis				1				1
Smallpox				39	4	10	3	36
Typhoid fever			6	10	2		3	21

COLOMBIA

Rodent plague from vessel at Buenaventura.—Report by mail relative to the plague rat found at Buenaventura, Colombia (Public Health Reports, February 26, 1926, p. 408), states that the rat was killed January 29, 1926, as it was jumping ashore from the British steamship *Cid.*

CUBA

Typhoid fever—Santiago de Cuba.—During the week ended February 27, 1926, 13 cases of typhoid fever with two deaths were reported at Santiago de Cuba.

GREECE

Plague—Herakleion—Island of Crete—February 4, 1926.—A case of plague was reported at Herakleion, Island of Crete, Greece, February 4, 1926.

GUADELOUPE (WEST INDIES)

Typhoid fever—Pointe à Pitre—January, 1926.—During the month of January, 1926, fatalities from typhoid fever were unofficially reported at Pointe à Pitre, Guadeloupe, West Indies.

Prevalence of other diseases.—During the same period 26 cases of amebic dysentery, 50 cases of malaria, and one case of paratyphoid fever were reported in hospital in the colony of Guadeloupe.

MALTA

Communicable diseases—January 1–31, 1926.—During the period January 1 to 31, 1926, communicable diseases were reported in the island of Malta as follows:

Disease	Cases	Disease	Cases
Broncho pneumonia	7	Measles	16
Chicken pox	28	Pneumonia	6
Diphtheria	2	Smallpox	15
Influenza	10	Tuberculosis	14
Malta (undulant) fever	27	Typhoid fever	16

Population, civil, estimated, 223,088.

SPAIN

Influenza mortality—Seville.—During the two weeks ended February 10, 1926, five deaths from influenza were reported at Seville, Spain.

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER

The reports contained in the following tables must not be considered as complete or final as regards either the lists of countries included or the figures for the particular countries for which reports are given.

Reports Received During Week Ended March 19, 1926 [1]

CHOLERA

Place	Date	Cases	Deaths	Remarks
India				Dec. 27, 1925–Jan. 2, 1926: Cases, 2,619; deaths, 1,453.
Madras	Jan. 24–Feb. 6	29	11	
Indo-China (French):				
Saigon	Jan. 11–17	1	1	Including 100 square kilometers of surrounding country.
Philippine Islands:				
Manila	Jan. 18–31	6	4	
Siam:				
Bangkok	Jan. 17–23	30	23	

PLAGUE

Argentina:				
Buenos Aires	Jan. 24–30	1		
Ceylon:				
Colombo				Jan. 24–30, 1926: 1 plague rodent.
Greece:				
Herakleion	Feb. 4	1		On island of Crete.
India				Dec. 27, 1925–Jan. 2, 1926: Cases, 1,876; deaths, 1,333.
Madras Presidency	Jan. 3–9	135	83	
Rangoon	Jan. 17–23	4	4	
Iraq:				
Bagdad	Jan. 24–30	4	4	
Java:				
Batavia	Jan. 16–22	58	54	Batavia Province.
Cheribon	Nov. 30–Dec. 19		96	
Pekalongan	do		131	
Surabaya	Jan. 3–9	6	6	East Java and Madoera.
Tegal	Nov. 30–Dec. 19		15	

[1] From medical officers of the Public Health Service, American consuls, and other sources.

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued

Reports Received During Week Ended March 19, 1926—Continued

PLAGUE—Continued

Place	Date	Cases	Deaths	Remarks
Netherlands East Indies:				
Celebes—				
Makassar	Jan. 6-12	2	2	
Siam:				
Bangkok	Jan. 17-23	2	1	
On vessel:				
Steamship Cid				Jan. 29, 1926: At Buenaventura, Colombia. Rat was killed while jumping ashore from vessel. (See Public Health Reports, Feb. 26, 1926, p. 408.)

SMALLPOX

Arabia:				
Aden	Jan. 31-Feb. 6	1		
Bahamas				In Nassau district. Stated to have been imported. Reported under date of Feb. 23, 1926.
Brazil:				
Rio de Janeiro	Dec. 27-Jan. 16	37	29	
British South Africa:				
Northern Rhodesia	Jan. 5-11	2		
Canada				Feb. 21-27, 1926: Cases, 36.
Alberta	Feb. 21-27	3		
Manitoba	do	4		
Ontario	do	19		
Toronto	do	1		
Saskatchewan	do	10		
Saskatoon	Feb. 14-20	1		
China:				
Amoy	Jan. 17-30		3	
Foochow	Jan. 17-23			Present.
Hongkong	do	2		
Manchuria—				
Dairen	Jan. 11-17	7	2	
Shanghai	Jan. 24-Feb. 6	15	28	Cases in foreign population in International Settlement and French Concession; deaths, Chinese and foreign.
South Manchurian Railway line—				
Changchun	Jan. 31-Feb. 6	4		
Kungchuling	do	1		
Tientsin	Jan. 23-30	1		
Egypt:				
Alexandria	Jan. 29-Feb. 4	2	1	
Great Britain:				
Hull	Feb. 7-20	6		
Newcastle-on-Tyne	do	1		
India				Dec. 27, 1925-Jan. 2, 1926: Cases, 3,869; deaths, 986.
Bombay	Jan. 10-16	19	9	
Calcutta	Jan. 17-23	56	27	
Karachi	Jan. 18-30	9	3	
Madras	Jan. 24-30	4	1	
Indo-China (French):				
Saigon	Jan. 11-17	1		Including 100 square kilometers of surrounding country.
Iraq:				
Bagdad	Jan. 24-30	6	2	
Italy:				
Genoa	Feb. 1-10	2		
Java:				
Buitenzorg	Nov. 29-Dec. 5	1		
Cheribon	Dec. 6-12	1		
Malang	Dec. 27-Jan. 2	1		
Surabaya	Jan. 3-9	25	6	East Java and Madoera.
Latvia				Dec. 1-31, 1925: Cases, 3.
Malta				Jan. 1-31, 1926: Cases, 15.
Mexico:				
Aguascalientes	Feb. 14-27		4	
Guadalajara	Feb. 23-Mar. 1		1	
San Luis Potosi	Feb. 21-27		6	

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued

Reports Received During Week Ended March 19, 1926—Continued

SMALLPOX—Continued

Place	Date	Cases	Deaths	Remarks
Netherlands:				
Hague, The	Jan. 30–Feb. 6	1	1	
Palestine:				
Hebron	Jan. 26–Feb. 1	2		
Persia:				
Teheran				Sept. 22–Oct. 22, 1925: Deaths, 262.
Portugal:				
Lisbon	Jan. 18–31		6	
Oporto	Jan. 31–Feb. 13	1	1	
Siam:				
Bangkok	Jan. 17–23	5	1	
Union of South Africa:				
Cape Province	Jan. 17–23			Outbreaks.
On vessel	Feb. 21	2		Mexican steamer Montezuma, at Port of Ensenada, Mexico.

TYPHUS FEVER

China:				
Harbin	Jan. 29–Feb. 4	2		
Latvia				December, 1925: Cases, 10.
Mexico:				
Mexico City	Feb. 14–20	2		Including municipalities in Federal District.
Turkey:				
Constantinople	Jan. 24–30	3		
Union of South Africa:				
Cape Province	Jan. 17–23			Outbreaks in two districts.

Reports Received from December 26, 1925, to March 12, 1926 [1]

CHOLERA

Place	Date	Cases	Deaths	Remarks
Chosen	October, 1925	6		
India				Oct. 18–Dec. 19, 1925: Cases, 18,697; deaths, 10,918.
Calcutta	Nov. 1–28	101	89	
Do	Dec. 6–26		54	
Do	Dec. 27–Jan. 16		41	
Madras	Nov. 15–Jan. 2	174	70	
Do	Jan. 3–23	41	32	
Rangoon	Nov. 8–Dec. 5	4	4	
Indo-China				September, 1925: Cases, 9; deaths, 5. September, 1924: Cases, 7; deaths, 4. (European cases, 2.)
Province—				
Annam	Sept. 1–30	2	2	September, 1924: None.
Cochin China	do	5	3	September, 1924: 1 case; 1 death.
Saigon	Jan. 4–10	1	1	Including 100 kilometers of surrounding country.
Tonkin	September, 1925	2		September, 1924: None.
Japan	Aug. 30–Oct. 17	409		
Do	Oct. 25–Nov. 28	82		
Philippine Islands:				
Manila	Nov. 9–Jan. 3	15	10	
Do	Jan. 4–18	5	17	
Province—				
Bataan	Nov. 30–Dec. 26	29	25	
Bulacan	Oct. 18–Nov. 7	92	64	
Do	Nov. 23–Dec. 31	200	88	
Laguna	Nov. 23–Dec. 26	18	14	
Nueva Ecija	do	6	2	
Pampanga	Nov. 1–7	1	1	
Do	Nov. 23–Dec. 31	113	85	
Rizal	Sept. 27–Nov. 21	75	21	
Romblon	Dec. 7–13	23	12	

[1] From medical officers of the Public Health Service, American consuls, and other sources

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued

Reports Received from December 26, 1925, to March 12, 1926—Continued

CHOLERA—Continued

Place	Date	Cases	Deaths	Remarks
Russia	May-June	7		
Do	July-August	4		
Siam:				
Bangkok	Oct. 4-Nov. 14	108	68	
Do	Nov. 22-Dec. 26	270	149	
Do	Dec. 27-Jan. 16	85	60	
On vessel:				
Steamship	Oct. 3	9		Arrived at Bangkok, Siam: cases in coolie passengers.

PLAGUE

Argentina				Jan. 24-30, 1926: Six cases, occurring in interior provinces of Salta and Santa Fe.
Brazil:				
Bahia	Nov. 8-Dec. 27	3	1	
Do	Dec. 27-Jan. 2	1	1	
Santos	Dec. 8-21		2	
British East Africa:				
Kenya—				
Kisumu	Nov. 22-Dec. 5	1	2	
Uganda Protectorate	September-November.	338	308	
Canary Islands:				
La Laguna	Dec. 24	3	2	
Las Palmas	do	1		
Do	Jan. 7	1	1	
Santa Cruz de Teneriffe	Dec. 18-27	3		
Do	Dec. 28-Feb. 1	3		
Celebes:				
Makassar	Dec. 29-Jan. 4	4	4	Netherlands East Indies.
Ceylon:				
Colombo	Nov. 15-Dec. 5	3	3	1 plague rodent.
Do	Dec. 27-Jan. 16	2	2	
China:				
Nanking	Nov. 15-Jan. 23			Prevalent.
Ecuador:				
Eloy Alfaro	Jan. 1-15	1		
Guayaquil	Nov. 1-Dec. 31	31	12	
Do	Jan. 1-31	34	14	Rats taken, Nov. 1-Dec. 31, 1925, 49,370; rats found infected, 281. Rats taken, Jan. 1-31, 1926, 24,672; rats found infected, 234.
Recreo (country estate)	do	1		
Egypt				Jan. 1-Dec. 9, 1925: Cases, 138. Corresponding period, 1924: Cases, 365.
Beni Suef	Nov. 18	1	1	
Fayoum Province	Dec. 3-9	1	1	
Greece:				
Athens	Nov. 1-30	18	4	Including Piræus.
Do	Jan. 1-31	14	3	
Patras	Nov. 13-Dec. 12	4	1	
Hawaii Territory:				
Paauilo				Jan. 29, 1926: Plague-infected rat found in vicinity.
India				Oct. 18-Dec. 26, 1925: Cases, 13,259; deaths, 9,344.
Bombay	Dec. 6-12	1	1	
Do	Jan. 3-9	2	2	
Calcutta	Dec. 6-12	1	1	
Karachi	Nov. 1-Dec. 19	4	3	
Madras	Oct. 25-Nov. 7	75	41	
Do	Nov. 15-21	35	22	
Do	Dec. 20-26	108	64	
Rangoon	Oct. 25-Dec. 26	23	15	
Do	Dec. 27-Jan. 16	10	8	
Indo-China				September, October, 1925: Cases, 25; deaths, 23. September, 1924, fatal, 12.
Province—				
Cambodia	Sept. 1-30	11	11	September, 1924: Cases, 9; deaths, 9.
Cochin China	September-October.	14	12	September, 1924: 1 case, 1 death.
Iraq:				
Bagdad	Dec. 13-Jan. 2	7	3	

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued

Reports Received from December 26, 1925, to March 12, 1926—Continued

PLAGUE—Continued

Place	Date	Cases	Deaths	Remarks
Java:				
Batavia	Oct. 24–Nov. 6	94	89	Province.
Do	Nov. 14–Jan. 1	315	297	
Do	Jan. 2–15	63	63	
Cheribon	Sept. 27–Oct. 17		166	
Do	Nov. 15–28		59	
Djokjakarta	Oct. 20–Nov. 9			Epidemic in 1 locality.
Kediri	Dec. 7			Do.
Pekalongan	Sept. 27–Oct. 17		42	
Do	Nov. 8–28		80	
Rembang	Oct. 20			Do.
Surabaya	Oct. 11–Dec. 26	59	59	
Do	Dec. 27–Jan. 2	10	10	
Tegal	Sept. 27–Oct. 17	6	6	
Do	Nov. 8–28		14	
Madagascar				Nov. 1–30, 1925: Cases, 232; deaths, 220.
Province—				
Itasy	Sept. 16–Oct. 31	20	20	
Do	Nov. 16–30	13	13	
Moramanga	Sept. 16–Nov. 30	25	25	
Tananarive	do	368	341	
Town—				
Fort Dauphin	do	6	3	
Tamatave (port)	Sept. 16–30	3	2	
Do	Oct. 16–Nov. 30	9	9	
Tananarive	Sept. 16–30	2	2	
Do	Nov. 1–30	11	11	
Mauritius Island	Sept. 20–Dec. 26	21	18	
Pamplemousses	Oct. 1–Nov. 30	3	2	
Port Louis	do	4	1	
Rivière du Rempart	do	2		
Netherlands India:				
Celebes Island—				
Makassar	Dec. 12			Epidemic.
Nigeria	August–October	496	371	
Peru:				
Huacho	Jan. 26	15		Port 60 miles north of Callao.
Lima	Jan. 1–31	20		In hospital. Some cases in province.
Mollendo	do			12 or 15 cases reported unofficially.
Russia	May–June	67		
Do	July–September	157		
Senegal	September–October.	45	25	
Siam	Aug. 23–Oct. 31	53	43	
Bangkok	Nov. 15–28	3	3	
Do	Jan. 3–16	36	31	
Straits Settlements:				
Singapore	Nov. 1–Dec. 5	8	8	
Syria:				
Beirut	Nov. 11–20	1		
Union of South Africa:				
Cape Province—				
Kimberley district	Dec. 13–19	1		
Middleburg district	Dec. 6–12	1		European.
Steynsburg district	Nov. 15–21	1		Native. On farm.
Orange Free State—				
Boshof district	Nov. 29–Dec. 5	1	1	In native.
Bothaville district	Dec. 6–12	1	1	Native. On farm.

SMALLPOX

Algeria:				
Algiers	Nov. 21–Dec. 31	177		
Do	Jan. 1–10	64		
Do	Jan. 21–31	36		
Arabia:				
Aden	Nov. 29–Dec. 5	1		Imported.
Do	Jan. 10–18	2	1	
Argentina:				
Rosario	October		1	

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued

Reports Received from December 26, 1925, to March 12, 1926—Continued

SMALLPOX—Continued

Place	Date	Cases	Deaths	Remarks
Australia:				
Queensland—				
Brisbane	Dec. 9–15	1		
Brazil:				
Para	Jan. 10–30	25	5	
Rio de Janeiro	Nov. 1–28	134	72	
Do	Dec. 6–26	65	26	
British East Africa:				
Kenya—				
Mombasa	Nov. 15–Dec. 19	14	6	
Do	Dec. 27–Jan. 2	1		From mainland.
Uganda Protectorate	Sept. 1–Oct. 31	8	4	
British South Africa:				
Southern Rhodesia	Nov. 13–Dec. 23	3		
Canada				Sept. 13–Jan. 2: In 7 Provinces, 186 cases. Jan. 3–23, 1926, cases, 115. Jan. 31–Feb. 6, 1926, cases, 33.
Alberta	Jan. 10–Feb. 26	26		
Calgary	Dec. 13–19	1		From Drumheller, vicinity of Calgary.
British Columbia—				
Vancouver	Jan. 4–10	1		
Manitoba	Jan. 3–Feb. 13	22		
Winnipeg	Dec. 13–19	2		
Do	Jan. 3–Feb. 6	9		
New Brunswick—				
Northumberland	Dec. 6–13	1		
Ontario	December, 1925	32	1	
Do	Jan. 1–Feb. 13	103		
Admaston	Jan. 1–31	11		
Ottawa	Dec. 6–12	2		
Do	Jan. 3–Feb. 6	2		
Toronto	Dec. 27–Jan. 2	1		
Do	Jan. 3–23	21		
Do	Feb. 6–20	3		
Trenton	Jan. 1–31	7		
Saskatchewan	Jan. 3–Feb. 13	39		
Moose Jaw	do	2		
Regina	Jan. 24–30	1		
Ceylon:				
Colombo	Dec. 6–12	1		Port case.
Do	Jan. 3–9	2		Do.
China:				
Amoy	Oct. 25–Dec. 19		1	
Do	Jan. 10–16			Present.
Antung	Dec. 7–20	2		
Chungking	Nov. 15–Jan. 23			Do.
Foochow	Nov. 1–Jan. 9			Do.
Hankow	Nov. 14–Dec. 26	4		
Do	Jan. 10–16	1		
Hongkong	Nov. 22–Dec. 26	4		
Do	Jan. 3–16	2		
Manchuria—				
An-shan	Dec. 6–12	1		
Do	Jan. 10–30	3		South Manchurian Railway.
Changchun	do	10		Do.
Dairen	Oct. 19–Dec. 27	73	15	
Do	Dec. 28–Jan. 10	20	4	
Fushun	Jan. 17–23	1		Do.
Harbin	Jan. 1–7	1		
Kai-yuan	Jan. 10–30	4		Do.
Lio-yang	Jan. 17–23	1		Do.
Mukden	Oct. 24–Nov. 15	1		Do.
Do	Jan. 24–30	1		Do.
Swatow	Nov. 22–Jan. 30			Prevalent.
Tieh-ling	do	2		
Nanking	Nov. 21–Dec. 26			Do.
Do	Dec. 27–Jan. 9			Do.
Shanghai	Oct. 25–Jan. 2	37	36	
Do	Jan. 3–23	24	49	Cases, foreign only.
Tientsin	Nov. 1–Dec. 19	2		
Egypt:				
Alexandria	Dec. 3–31	5	2	
Do	Jan. 8–14	2	1	
Esthonia				November, 1925: Cases, 3.

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued

Reports Received from December 26, 1925, to March 12, 1926—Continued

SMALLPOX—Continued

Place	Date	Cases	Deaths	Remarks
France				September-October, 1925: Cases, 91.
Gold Coast	September, 1925	14	4	
Great Britain:				
England and Wales				Nov. 15-Dec. 26, 1925: Cases, 790. Dec. 27-Jan. 30, 1926: Cases, 1,526
Hull	Dec. 27-Jan. 23	29		
Leeds	Jan. 14-Feb. 6	4		
Newcastle-on-Tyne	Nov. 29-Dec. 19	6		
Do	Dec. 27-Feb. 6	20		
Nottingham	Nov. 22-Dec. 26	9		
Do	Dec. 27-Jan. 9	2		
Sheffield	Nov. 22-Dec. 12	7		
Do	Dec. 20-26	3		
Do	Dec. 27-Feb. 6	12		
South Shields	Feb. 9			Reported present in severe form. Locality on Tyne River, 10 miles from Newcastle; present in Arab quarters of town.
Greece				Oct. 1-31, 1925: Cases, 16.
Athens	Nov. 1-30	17	1	
Do	Jan. 1-31	23	1	
India				Oct. 18-Dec. 26, 1925: Cases, 19,472; deaths, 4,440.
Bombay	Nov. 8-Dec. 26	26	20	
Do	Dec. 27-Jan. 9	26	13	
Calcutta	Nov. 29-Dec. 26	48	25	
Do	Dec. 27-Jan. 16	73	36	
Karachi	Nov. 1-21	23		
Do	Nov. 29-Dec. 5	4	2	
Do	Dec. 13-19	3		
Do	Dec. 29-Jan. 16	12	6	
Madras	Nov. 15-Dec. 26	17	5	
Do	Dec. 27-Jan. 23	28	7	
Rangoon	Oct. 25-Nov. 28	3		
Do	Dec. 6-26	4	1	
Do	Dec. 27-Jan. 16	13	1	
Indo-China				September-October, 1925: Cases, 204; deaths, 62. September, 1924: Cases, 78; deaths, 22.
Province—				
Annam	Sept. 1-Oct. 31	90	23	September, 1924: Cases, 8; deaths, 2.
Cambodia	do	72	30	September, 1924: Cases, 16; deaths, 1.
Cochin China	do	61	30	September, 1924: Cases, 43; deaths, 19.
Saigon	Dec. 21-27	2	1	Including 100 kilometers of surrounding country.
Do	Jan. 1-10	1		
Tonkin	do	22		September, 1924: Cases, 11.
Iraq				Sept. 6-Oct. 17, 1925: Cases, 81; deaths, 40.
Bagdad	Nov. 1-14	4	4	
Do	Nov. 22-Dec. 26	15	11	
Do	Dec. 27-Jan. 2	5	2	
Italy				Aug. 2-Oct. 31, 1925: Cases, 38.
Genoa	Jan. 21-31	2		
Rome	Oct. 12-25	1		
Jamaica				Nov. 29-Dec. 26, 1925: Cases, 95. Dec. 27-Jan. 30, 1926: Cases, 138. Reported as alastrim.
Kingston	Nov. 29-Dec. 26	43		Reported as alastrim.
Do	Dec. 27-Jan. 30	48		Do.
Japan:				
Taiwan	Nov. 11-Dec. 10	3		
Yokohama	Dec. 14-20	1		
Do	Feb. 23	7		
Java:				
Batavia	Oct. 24-30	1		
Do	Nov. 14-Dec. 25	7		
Cheribon	Nov. 8-14	1		
Kraksaan	Oct. 11-17	11		
Malang	do	2		
North Bantam	Oct. 4-17	4		
Pekalongan	Oct. 25-31	1		

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued

Reports Received from December 26, 1925, to March 12, 1926—Continued

SMALLPOX—Continued

Place	Date	Cases	Deaths	Remarks
Java—Continued.				
Probolingo	Oct. 11–17	1		
Surabaya	Oct. 11–Dec. 26	633	104	
Do	Dec. 27–Jan. 2	17	10	
South Bantam	Oct. 11–17	1		
Tegal	Oct. 4–10	9	1	
Latvia				December, 1925: Cases, 3.
Malta	Nov. 1–Dec. 31	21	3	
Mexico				July–September, 1925: Deaths, 1,157.
Aguascalentes	Dec. 13–Jan. 2	4	3	
Do	Jan. 3–30		7	
Durango	Dec. 1–31		1	
Do	Jan. 1–31		2	
Guadalajara	Feb. 1–22		3	
Mexico City	Nov. 28–Dec. 5	1		Including municipalities in Federal District
Do	Jan. 3–Feb. 6	4		Do.
San Luis Potosi	Jan. 17–Feb. 20		27	
Tampico	Dec. 21–Jan. 2	1	1	
Do	Jan. 2–Feb. 20	5		
Torreon	Nov. 1–Dec. 31		51	
Do	Jan. 1–31		33	
Nigeria	August–October	211	6	
Persia:				
Teheran	July 23–Sept 22		203	
Peru:				
Arequipa	Oct. 1–Dec. 31		2	
Poland				Nov. 1–28, 1925: Cases, 9.
Portugal:				
Lisbon	Oct. 4–31	124		
Do	Nov. 16–Dec. 27		60	
Do	Nov. 14–Dec. 26	187		
Do	Dec. 27–Jan. 17	40	17	
Oporto	Nov. 22–Dec. 19	2	3	
Do	Dec. 27–Jan. 2	1		
Russia				May–June, 1925: Cases, 2,333.
Do	July–August	760		
Siam				July 12–Sept. 5, 1925: Cases, 21; deaths, 6.
Bangkok	Dec. 20–25	3	1	
Do	Dec. 26–Jan. 16	8	5	
Sierra Leone:				
Konno district	Dec. 16–31	5		
Spain:				
Madrid	Year 1925		18	
Malaga	Nov. 29–Dec. 5		2	
Do	Dec. 27–Jan. 2		1	
Valencia	Dec. 20–26	1		
Do	Dec. 27–Jan. 2	1		
Do	Jan. 10–Feb. 6	9		
Straits Settlements:				
Singapore	Dec. 20–26	1		
Switzerland				June 28–Nov. 21, 1925: Cases, 62.
Lucerne	Oct. 1–Nov. 30	8		
Zurich	Dec. 27–Jan. 2	1		
Trinidad (West Indies):				
Port of Spain	Jan. 22	1		Imported.
Tunisia:				
Tunis	Nov. 21–30	2		
Do	Dec. 11–31	10	1	
Do	Jan. 1–20	5		
Union of South Africa:				
Orange Free State—				
Kuruman district	Jan. 10–16			Outbreaks.
Ladybrand district	Dec. 27–Jan. 2			Do.
Transvaal—				
Belfast district	do			Do.
Germiston district	Jan. 2–9			Do.
Pretoria district	Dec. 6–12			Outbreaks. In native compound.

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued

Reports Received from December 26, 1925, to March 12, 1926—Continued

TYPHUS FEVER

Place	Date	Cases	Deaths	Remarks
Algeria:				
Algiers	Nov. 1-Dec. 20	2		
Argentina:				
Rosario	Oct. 13-Dec. 31	2		
Bulgaria	Sept. 1-Nov. 30	29	2	
Sofia	Dec. 25-31	1		
Do	Jan. 8-14	2		
Chile:				
Valparaiso	Nov. 29-Jan. 2		2	
China:				
Antung	Nov. 20-Dec. 27	5	1	
Do	Jan. 4-10	1		
Hongkong	Dec. 27-Jan. 2	1		
Manchuria—				
Harbin	Dec. 17-23	1		
Czechoslovakia	October-November	94		
Egypt:				
Alexandria	Jan. 8-14	1		
Cairo	Nov. 5-11	2	2	
Port Said	Nov. 19-25	1		
Finland				October, 1925: 1 case.
France	July-October	4		
Germany	Oct. 25-31	1		
Greece:				
Athens	Nov. 1-30	11	2	
Do	Jan. 1-31	19	4	
Saloniki	Dec. 29-Jan. 4	1		
Hungary				November, 1925: Cases, 3.
Ireland:				
Cork County—				
Cork	Dec. 26-Jan. 1	2		
Do	Jan. 2-8	5		
Dumanway	Nov. 14	1		
Galway County	Oct. 17	1		
Latvia	October, 1925	2		
Lithuania				September-October, 1925: Cases, 9; deaths, 1.
Mexico				July-September, 1925: Deaths, 90.
Aguascalientes	Dec. 14-19	1		
Durango	Dec. 1-31		1	
Do	Jan. 1-31		1	
Guadalajara	Dec. 8-28		2	
Do	Dec. 29-Jan. 4		1	
Mexico City	Nov. 22-Dec. 26	145		Including municipalities in Federal District.
Do	Dec. 27-Feb. 13	56		Do.
San Luis Potosi	Feb. 6-13		1	
Tampico	Dec. 21-Jan. 10	1	1	
Torreon	November, 1925		1	
Vera Cruz	Feb. 12		1	
Morocco	August-November	39		
Norway				November, 1925: Case, 1.
Palestine:				
Gaza	Dec. 18	1		
Jaffa	Dec. 1-7	1		
Nazareth	Nov. 3-9	1		
Safad	Nov. 24-30	1		
Tel-Aviv	do	1		
Peru:				
Arequipa	October-December		3	
Poland	Oct. 11-Nov. 14	142	16	
Rumania				July-August, 1925: Cases, 107; deaths, 15.
Russia				May-June, 1925: Cases, 10,680.
Do				July-September, 1925; Cases, 3,851.

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued

Reports Received from December 26, 1925, to March 12, 1926—Continued

TYPHUS FEVER—Continued

Place	Date	Cases	Deaths	Remarks
Union of South Africa				October, 1925: Cases, 88; deaths 7 (colored). Cases, European, 7. December, 1925: Cases, 78; deaths, 9. Colored: Cases, 73; deaths, 9.
Cape Province	Oct. 1-31	63	5	Colored.
Do	Nov. 8-Dec. 31	47	8	
Do	Jan. 3-16			Outbreaks.
Middleburg district	Dec. 6-12	1		European. On farm.
Natal	Oct. 1-Dec. 5	1		
Durban	Jan 3-16	1		
Orange Free State	Nov. 29-Dec. 5	23	1	
Do	Dec. 1-31	8	1	
Bethulia district	Dec. 6-12			Outbreaks.
Bothaville district	do	1		Native. On farm.
Transvaal	Oct. 1-31	1	1	
Do	Dec. 1-31	18		
Bloemhof district	Dec. 27-Jan. 2			Outbreaks. On farm.

YELLOW FEVER

Gold Coast	September-October	2	1	
Nigeria	August-October	3	2	
Senegal	November, 1925	3	2	